



QUARTERLY STATEMENT

AS OF MARCH 31, 2012  
OF THE CONDITION AND AFFAIRS OF THE

Humana Health Plan, Inc.

NAIC Group Code	0119	0119	NAIC Company Code	95885	Employer's ID Number	61-1013183
	(Current Period)	(Prior Period)				
Organized under the Laws of	Kentucky		State of Domicile or Port of Entry	Kentucky		
Country of Domicile	United States					
Licensed as business type:	Life, Accident & Health [ ]		Property/Casualty [ ]	Hospital, Medical & Dental Service or Indemnity [ ]		
	Dental Service Corporation [ ]		Vision Service Corporation [ ]	Health Maintenance Organization [ X ]		
	Other [ ]			Is HMO, Federally Qualified? Yes [ X ] No [ ]		
Incorporated/Organized	08/23/1982		Commenced Business	09/23/1983		
Statutory Home Office	321 West Main Street - 12th Floor		Louisville, KY 40202			
	(Street and Number)		(City or Town, State and Zip Code)			
Main Administrative Office	321 West Main Street - 12th Floor		Louisville, KY 40202	502-580-1000		
	(Street and Number)		(City or Town, State and Zip Code)	(Area Code) (Telephone Number)		
Mail Address	P.O. Box 740036		Louisville, KY 40201-7436			
	(Street and Number or P.O. Box)		(City or Town, State and Zip Code)			
Primary Location of Books and Records	321 West Main Street - 12th Floor		Louisville, KY 40202	502-580-1000		
	(Street and Number)		(City or Town, State and Zip Code)	(Area Code) (Telephone Number)		
Internet Web Site Address	www.humana.com					
Statutory Statement Contact	Abby Goodloe		502-580-1632			
	(Name)		(Area Code) (Telephone Number) (Extension)			
	DOIINQUIRIES@humana.com		502-580-2099			
	(E-mail Address)		(FAX Number)			

OFFICERS

Name	Title	Name	Title
Michael Benedict McCallister	CEO	Joan Olliges Lenahan	VP & Corporate Secretary
James Harry Bloem	Sr. VP, CFO & Treasurer	Jonathan Albert Canine	Appointed Actuary

OTHER OFFICERS

Randa Lynn Anderson-Stice	Reg.Pres. - Sr. Prod/Central Reg.	George Grant Bauernfeind	Vice President
Jeffrey Bergin Bringardner	Market President - Kentucky	John Ellis Brown	VP - Medicare Service Operations
John Gregory Catron	Vice President	Denise Louise Christy	Market President - MI/IN
Peter James Edwards	VP & Div. Leader - Eastern Div.	Mark Sobhi El-Tawil	Reg. CEO/West Region
Michael Paul Franks	Reg.Pres.-Sr.Prod/West Coast Reg.	Roy Goldman Ph.D	VP & Chief Actuary
Gary Edward Goldstein M.D.	VP & Div. Leader - Central Div.	Deborah Ann Gracey	Reg.Pres.-Sr.Prod.-North Region
Robert Todd Hitchcock	VP & Div. Leader - Western Div.	Morris Curt Howell	Market President-NV/AZ/UT
Paul Francis Kraemer	Regional CEO - East Region	Charles Frederic Lambert III	Vice President
Thomas Joseph Liston	Sr. Vice President - Sr. Prod.	Clarence Evans Looney	Market President - Tennessee
Kenneth Scott Malcolmson	Regional CEO	Heidi Suzanne Margulis	Sr. Vice President
Kevin Ross Meriwether	Reg. President - Sr. Prod/East	Khalid Nazir	Vice President
Daniel Joseph Oftedahl	Market President - Colorado	George Renaudin	VP & Div. Leader - Southern Div.
David Thomas Reynolds	Market President - Illinois	Oraida Maria Roman	RegPresSrProd/IntermountainReg
Larry Dale Savage	Regional CEO	Debra Anne Smith	VP-Sr.Prod Strategy & Prod Dev
William Joseph Tait	Vice President	Joseph Christopher Ventura	Assistant Secretary
Timothy Alan Wheatley	VP - Sr. Products/Finance	Ralph Martin Wilson	Vice President

DIRECTORS OR TRUSTEES

James Harry Bloem	Michael Benedict McCallister	James Elmer Murray
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State of Kentucky

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County of Jefferson

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC *Annual Statement Instructions and Accounting Practices and Procedures* manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

Michael Benedict McCallister CEO	Joan Olliges Lenahan VP & Corporate Secretary	James Harry Bloem Sr. VP, CFO & Treasurer
a. Is this an original filing? Yes [ X ] No [ ]		
b. If no:		
1. State the amendment number		
2. Date filed		
3. Number of pages attached		
Subscribed and sworn to before me this 11th day of May, 2012		
Myra Carpenter, Notary Public August 9, 2013		

STATEMENT AS OF MARCH 31, 2012 OF THE Humana Health Plan, Inc.

ASSETS

	Current Statement Date			4  December 31 Prior Year Net Admitted Assets
	1  Assets	2  Nonadmitted Assets	3  Net Admitted Assets (Cols. 1 - 2)	
1. Bonds .....	399,548,543		399,548,543	353,870,728
2. Stocks:				
2.1 Preferred stocks .....			0	0
2.2 Common stocks .....	30,749,294		30,749,294	30,779,448
3. Mortgage loans on real estate:				
3.1 First liens .....	27,600,000		27,600,000	27,600,000
3.2 Other than first liens .....			0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$ ..... encumbrances) .....			0	0
4.2 Properties held for the production of income (less \$ ..... encumbrances) .....			0	0
4.3 Properties held for sale (less \$ ..... encumbrances) .....			0	0
5. Cash (\$ ..... (8,494,244) ), cash equivalents (\$ ..... 165,997,146 ) and short-term investments (\$ ..... 53,149,067 ) .....	210,651,969		210,651,969	38,931,986
6. Contract loans (including \$ ..... premium notes) .....			0	0
7. Derivatives .....			0	0
8. Other invested assets .....	0		0	0
9. Receivables for securities .....			0	0
10. Securities lending reinvested collateral assets .....			0	0
11. Aggregate write-ins for invested assets .....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	668,549,806	0	668,549,806	451,182,162
13. Title plants less \$ ..... charged off (for Title insurers only) .....			0	0
14. Investment income due and accrued .....	3,576,875		3,576,875	3,304,883
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....	15,918,146	480,919	15,437,227	16,824,012
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ ..... earned but unbilled premiums) .....			0	0
15.3 Accrued retrospective premiums .....	35,729,642		35,729,642	18,392,573
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers .....	2		2	0
16.2 Funds held by or deposited with reinsured companies .....			0	0
16.3 Other amounts receivable under reinsurance contracts .....			0	0
17. Amounts receivable relating to uninsured plans .....	18,638,912	193,659	18,445,253	13,640,534
18.1 Current federal and foreign income tax recoverable and interest thereon .....	0		0	5,609,118
18.2 Net deferred tax asset .....	62,423,424	51,297,606	11,125,818	11,125,818
19. Guaranty funds receivable or on deposit .....			0	0
20. Electronic data processing equipment and software .....	1,085,374	919,954	165,420	189,693
21. Furniture and equipment, including health care delivery assets (\$ ..... ) .....	5,990,426	5,990,426	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates .....			0	0
23. Receivables from parent, subsidiaries and affiliates .....	2,466,372		2,466,372	0
24. Health care (\$ ..... 10,727,077 ) and other amounts receivable .....	15,141,267		15,141,267	8,491,484
25. Aggregate write-ins for other than invested assets .....	121,590,900	121,590,900	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	951,111,146	180,473,464	770,637,682	528,760,277
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			0	0
28. Total (Lines 26 and 27) .....	951,111,146	180,473,464	770,637,682	528,760,277
<b>DETAILS OF WRITE-INS</b>				
1101. ....			0	0
1102. ....			0	0
1103. ....			0	0
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above) .....	0	0	0	0
2501. Goodwill on acquired membership .....	112,647,310	112,647,310	0	0
2502. Prepaid Commissions .....	7,587,616	7,587,616	0	0
2503. Deposits .....	716,036	716,036	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page .....	639,938	639,938	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above) .....	121,590,900	121,590,900	0	0

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$ .....242 reinsurance ceded).....	234,231,211	7,291,532	241,522,743	185,077,257
2. Accrued medical incentive pool and bonus amounts .....	1,311,658		1,311,658	1,196,921
3. Unpaid claims adjustment expenses .....	3,625,096		3,625,096	2,447,979
4. Aggregate health policy reserves including the liability of \$ .....14,716,452 for medical loss ratio rebate per the Public Health Service Act .....	28,599,693		28,599,693	21,447,529
5. Aggregate life policy reserves .....			0	0
6. Property/casualty unearned premium reserve .....			0	0
7. Aggregate health claim reserves .....	217,237	6,763	224,000	216,001
8. Premiums received in advance .....	184,596,638		184,596,638	15,015,630
9. General expenses due or accrued .....	9,411,350		9,411,350	12,901,338
10.1 Current federal and foreign income tax payable and interest thereon (including \$ ..... on realized gains (losses)) .....	613,954		613,954	0
10.2 Net deferred tax liability.....			0	0
11. Ceded reinsurance premiums payable .....	143,113		143,113	213,567
12. Amounts withheld or retained for the account of others .....			0	0
13. Remittances and items not allocated .....	828,455		828,455	1,137,920
14. Borrowed money (including \$ ..... current) and interest thereon \$ ..... (including \$ ..... current) .....			0	0
15. Amounts due to parent, subsidiaries and affiliates .....	0		0	8,378,127
16. Derivatives.....			0	0
17. Payable for securities .....	6,480,110		6,480,110	0
18. Payable for securities lending .....			0	0
19. Funds held under reinsurance treaties (with \$ ..... authorized reinsurers and \$ ..... unauthorized reinsurers).....			0	0
20. Reinsurance in unauthorized companies .....			0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates .....			0	0
22. Liability for amounts held under uninsured plans .....	29,428,292		29,428,292	14,276,904
23. Aggregate write-ins for other liabilities (including \$ .....5,562 current) .....	163,075	0	163,075	974,003
24. Total liabilities (Lines 1 to 23).....	499,649,882	7,298,295	506,948,177	263,283,176
25. Aggregate write-ins for special surplus funds .....	XXX	XXX	0	0
26. Common capital stock .....	XXX	XXX	2,248,000	2,248,000
27. Preferred capital stock .....	XXX	XXX		0
28. Gross paid in and contributed surplus .....	XXX	XXX	416,255,377	416,255,377
29. Surplus notes .....	XXX	XXX		0
30. Aggregate write-ins for other than special surplus funds .....	XXX	XXX	0	0
31. Unassigned funds (surplus) .....	XXX	XXX	(154,813,872)	(153,026,276)
32. Less treasury stock, at cost:				
32.1 ..... shares common (value included in Line 26 \$ ..... ) .....	XXX	XXX		0
32.2 ..... shares preferred (value included in Line 27 \$ ..... ) .....	XXX	XXX		0
33. Total capital and surplus (Lines 25 to 31 minus Line 32) .....	XXX	XXX	263,689,505	265,477,101
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	770,637,682	528,760,277
DETAILS OF WRITE-INS				
2301. Miscellaneous Liability.....	157,476		157,476	0
2302. Medicare Risk Adjustment Payable.....	5,599		5,599	5,596
2303. Due to CMS.....			0	968,407
2398. Summary of remaining write-ins for Line 23 from overflow page .....	0	0	0	0
2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)	163,075	0	163,075	974,003
2501. ....	XXX	XXX		0
2502. ....	XXX	XXX		0
2503. ....	XXX	XXX		0
2598. Summary of remaining write-ins for Line 25 from overflow page .....	XXX	XXX	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	XXX	XXX	0	0
3001. ....	XXX	XXX		0
3002. ....	XXX	XXX		0
3003. ....	XXX	XXX		0
3098. Summary of remaining write-ins for Line 30 from overflow page .....	XXX	XXX	0	0
3099. Totals (Lines 3001 through 3003 plus 3098) (Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

	Current Year To Date		Prior Year To Date	Prior Year Ended December 31
	1 Uncovered	2 Total	3 Total	4 Total
1. Member Months.....	XXX	1,384,347	1,194,375	4,793,106
2. Net premium income (including \$ non-health premium income).....	XXX	734,972,065	594,996,661	2,353,136,224
3. Change in unearned premium reserves and reserve for rate credits .....	XXX	(3,265,661)	(36,292)	(11,537,202)
4. Fee-for-service (net of \$ medical expenses) .....	XXX		.0	.0
5. Risk revenue .....	XXX		.0	.0
6. Aggregate write-ins for other health care related revenues .....	XXX	.0	.0	.0
7. Aggregate write-ins for other non-health revenues .....	XXX	.0	.0	.0
8. Total revenues (Lines 2 to 7) .....	XXX	731,706,404	594,960,369	2,341,599,022
<b>Hospital and Medical:</b>				
9. Hospital/medical benefits .....	18,289,059	536,772,089	404,859,595	1,674,361,170
10. Other professional services .....		4,783,795	3,880,161	16,242,681
11. Outside referrals .....		.0	.0	.0
12. Emergency room and out-of-area .....	876,720	13,602,816	16,440,578	59,396,240
13. Prescription drugs .....		77,351,936	60,195,989	208,030,083
14. Aggregate write-ins for other hospital and medical.....	.0	.0	.0	.0
15. Incentive pool, withhold adjustments and bonus amounts.....		125,999	359,370	682,256
16. Subtotal (Lines 9 to 15) .....	19,165,779	632,636,635	485,735,693	1,958,712,430
<b>Less:</b>				
17. Net reinsurance recoveries .....		245	199	1,951
18. Total hospital and medical (Lines 16 minus 17) .....	19,165,779	632,636,390	485,735,494	1,958,710,479
19. Non-health claims (net).....			.0	.0
20. Claims adjustment expenses, including \$ 28,194,641 cost containment expenses.....		36,422,126	18,987,225	112,108,245
21. General administrative expenses.....		73,259,585	71,923,868	279,379,780
22. Increase in reserves for life and accident and health contracts (including \$ increase in reserves for life only).....		1,204,099	312,791	(4,023,139)
23. Total underwriting deductions (Lines 18 through 22) .....	19,165,779	743,522,200	576,959,378	2,346,175,365
24. Net underwriting gain or (loss) (Lines 8 minus 23) .....	XXX	(11,815,796)	18,000,991	(4,576,343)
25. Net investment income earned .....		3,527,448	3,095,903	12,718,733
26. Net realized capital gains (losses) less capital gains tax of \$ 252,225 .....		468,417	41,872	163,267
27. Net investment gains (losses) (Lines 25 plus 26) .....	.0	3,995,865	3,137,775	12,882,000
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$ ) (amount charged off \$ )] .....		.0	.0	.0
29. Aggregate write-ins for other income or expenses .....	.0	5,079	56,520	11,923
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29) .....	XXX	(7,814,852)	21,195,286	8,317,580
31. Federal and foreign income taxes incurred .....	XXX	361,729	8,128,640	2,856,655
32. Net income (loss) (Lines 30 minus 31) .....	XXX	(8,176,581)	13,066,646	5,460,925
<b>DETAILS OF WRITE-INS</b>				
0601. ....	XXX		.0	.0
0602. ....	XXX		.0	.0
0603. ....	XXX		.0	.0
0698. Summary of remaining write-ins for Line 6 from overflow page .....	XXX	.0	.0	.0
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above) .....	XXX	0	0	0
0701. ....	XXX		.0	.0
0702. ....	XXX		.0	.0
0703. ....	XXX		.0	.0
0798. Summary of remaining write-ins for Line 7 from overflow page .....	XXX	.0	.0	.0
0799. Totals (Lines 0701 through 0703 plus 0798) (Line 7 above) .....	XXX	0	0	0
1401. ....			.0	.0
1402. ....			.0	.0
1403. ....			.0	.0
1498. Summary of remaining write-ins for Line 14 from overflow page .....	.0	.0	.0	.0
1499. Totals (Lines 1401 through 1403 plus 1498) (Line 14 above) .....	0	0	0	0
2901. Miscellaneous Income.....		5,079	56,520	11,923
2902. ....			.0	.0
2903. ....				
2998. Summary of remaining write-ins for Line 29 from overflow page .....	.0	.0	.0	.0
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above) .....	0	5,079	56,520	11,923

STATEMENT OF REVENUE AND EXPENSES (Continued)

	1	2	3
	Current Year To Date	Prior Year To Date	Prior Year Ended December 31
<b>CAPITAL &amp; SURPLUS ACCOUNT</b>			
33. Capital and surplus prior reporting year.....	265,477,101	280,881,844	280,881,844
34. Net income or (loss) from Line 32 .....	(8,176,581)	13,066,646	5,460,925
35. Change in valuation basis of aggregate policy and claim reserves .....		0	0
36. Change in net unrealized capital gains (losses) less capital gains tax of \$ .....252,225	134,594	86,067	1,805,796
37. Change in net unrealized foreign exchange capital gain or (loss) .....		0	0
38. Change in net deferred income tax .....	0	0	3,853,240
39. Change in nonadmitted assets .....	6,254,391	3,432,091	3,508,050
40. Change in unauthorized reinsurance .....	0	0	0
41. Change in treasury stock .....		0	0
42. Change in surplus notes .....	0	0	0
43. Cumulative effect of changes in accounting principles .....		0	0
44. Capital Changes:			
44.1 Paid in .....		0	0
44.2 Transferred from surplus (Stock Dividend) .....		0	0
44.3 Transferred to surplus .....		0	0
45. Surplus adjustments:			
45.1 Paid in .....		0	0
45.2 Transferred to capital (Stock Dividend) .....	0	0	0
45.3 Transferred from capital .....		0	0
46. Dividends to stockholders .....		0	(30,000,000)
47. Aggregate write-ins for gains or (losses) in surplus .....	0	0	(32,754)
48. Net change in capital and surplus (Lines 34 to 47) .....	(1,787,596)	16,584,804	(15,404,743)
49. Capital and surplus end of reporting period (Line 33 plus 48)	263,689,505	297,466,648	265,477,101
<b>DETAILS OF WRITE-INS</b>			
4701. Correction of prior period.....	0	0	(32,754)
4702. ....		0	0
4703. ....			
4798. Summary of remaining write-ins for Line 47 from overflow page .....	0	0	0
4799. Totals (Lines 4701 through 4703 plus 4798) (Line 47 above)	0	0	(32,754)

CASH FLOW

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
<b>Cash from Operations</b>			
1. Premiums collected net of reinsurance.....	891,485,566	584,327,707	2,369,727,212
2. Net investment income .....	4,269,952	3,972,227	16,383,319
3. Miscellaneous income .....	0	0	0
4. Total (Lines 1 to 3) .....	895,755,518	588,299,934	2,386,110,531
5. Benefit and loss related payments .....	577,272,269	470,384,697	1,928,314,088
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....		0	0
7. Commissions, expenses paid and aggregate write-ins for deductions .....	101,315,753	61,686,394	380,974,931
8. Dividends paid to policyholders .....		0	0
9. Federal and foreign income taxes paid (recovered) net of \$ ..... 252,225 tax on capital gains (losses).....	(5,356,893)	14,981,855	23,535,543
10. Total (Lines 5 through 9) .....	673,231,129	547,052,946	2,332,824,562
11. Net cash from operations (Line 4 minus Line 10) .....	222,524,389	41,246,988	53,285,969
<b>Cash from Investments</b>			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds .....	29,407,838	14,967,127	85,153,223
12.2 Stocks .....	0	0	0
12.3 Mortgage loans .....	0	0	0
12.4 Real estate .....	0	0	0
12.5 Other invested assets .....	0	(1,661,305)	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments .....	(539)	(36)	(222)
12.7 Miscellaneous proceeds .....	6,732,335	0	1,372,961
12.8 Total investment proceeds (Lines 12.1 to 12.7) .....	36,139,634	13,305,786	86,525,962
13. Cost of investments acquired (long-term only):			
13.1 Bonds .....	75,214,220	29,387,867	98,832,959
13.2 Stocks .....	0	0	0
13.3 Mortgage loans .....	0	0	0
13.4 Real estate .....	0	0	0
13.5 Other invested assets .....	0	0	0
13.6 Miscellaneous applications .....	0	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6) .....	75,214,220	29,387,867	98,832,959
14. Net increase (or decrease) in contract loans and premium notes .....	0	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14) .....	(39,074,586)	(16,082,081)	(12,306,997)
<b>Cash from Financing and Miscellaneous Sources</b>			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes .....	0	0	0
16.2 Capital and paid in surplus, less treasury stock.....	0	0	0
16.3 Borrowed funds .....	0	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities .....		0	0
16.5 Dividends to stockholders .....	0	0	30,000,000
16.6 Other cash provided (applied).....	(11,729,820)	11,081,873	19,188,643
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6).....	(11,729,820)	11,081,873	(10,811,357)
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .....	171,719,983	36,246,780	30,167,615
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	38,931,986	8,764,371	8,764,371
19.2 End of period (Line 18 plus Line 19.1) .....	210,651,969	45,011,151	38,931,986

STATEMENT AS OF MARCH 31, 2012 OF THE Humana Health Plan, Inc.

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	397,622	22,302	192,132	.0	3,911	11,886	23,847	137,974	.0	5,570
2 First Quarter .....	462,804	25,979	184,230	.0	4,469	18,022	22,582	207,522	.0	.0
3 Second Quarter .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. Third Quarter .....	.0									
5. Current Year	0									
6 Current Year Member Months	1,384,347	73,924	559,519		13,420	50,362	67,911	619,211		
Total Member Ambulatory Encounters for Period:										
7. Physician .....	672,527	16,104	199,760			1	34,664	421,998		
8. Non-Physician .....	592,533	10,160	143,836			4	15,242	423,291		
9. Total	1,265,060	26,264	343,596	0	0	5	49,906	845,289	0	0
10. Hospital Patient Days Incurred	176,662	1,143	43,149				1,166	131,204		
11. Number of Inpatient Admissions	37,632	292	10,962				476	25,902		
12. Health Premiums Written (a).....	735,205,400	10,943,287	175,139,269	.896	184,841	1,029,198	31,894,176	516,013,733		
13. Life Premiums Direct.....	.0	.0								
14. Property/Casualty Premiums Written .....	.0									
15. Health Premiums Earned .....	731,939,739	10,892,207	171,924,688	.896	184,841	1,029,198	31,894,176	516,013,733		
16. Property/Casualty Premiums Earned .....	.0									
17. Amount Paid for Provision of Health Care Services .....	580,543,809	6,069,790	127,767,041	.302	101,198	624,181	28,872,443	417,108,854		
18. Amount Incurred for Provision of Health Care Services	632,636,635	6,501,601	126,103,932	243	101,198	697,734	28,882,946	470,348,981		

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 516,013,733

STATEMENT AS OF MARCH 31, 2012 OF THE Humana Health Plan, Inc.

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
Claims unpaid (Reported)						
BI PAUL KING KASPER.....	4,118					4,118
CIARLARIELLO SIDHOM.....	2,360					2,360
GLEN ELLYN CLINIC.....					94,236	94,236
N W SUBURBAN ANEST.....					6,041	6,041
WOMENS HEALTH CONS.....					237,902	237,902
DUAL DCODE.....	6,779					6,779
4 UMD LLC.....	2,045					2,045
A UNABLE TO UPDATE PROVIDER INFORMATION.....	5,071					5,071
A2CL LAB SERVICES.....	2,432					2,432
ACARIAHEALTH PHARMACY 12.....	2,859					2,859
ACCESS HOME HEALTH AGENCY.....	4,689					4,689
ACCREDITO HE ALTH GROUP.....	9,521					9,521
ADAMS MEMORIAL HOSPITAL.....		4,900				4,900
ADDISON RADIOLOGY ASSOCIATION.....					254,423	254,423
ADMINISTRATIVE PROCESSING.....		3,000				3,000
ADV GOOD SHEPHERD HOSPITAL.....	3,797					3,797
ADV LUTHERAN GEN HOSPITAL.....	5,358					5,358
ADVANCED FAMILY SURGERY CENTER.....	5,288					5,288
ADVANCED INFUSION SOLUTIONS.....	3,394					3,394
ADVENTIST BOLINGBROOK HOSPITAL.....	43,868					43,868
ADVENTIST GLEN OAKS HOSPITAL.....	22,366	3,456				25,822
ADVENTIST HINSDALE HOSPITAL.....	136,249	12,648				148,897
ADVENTIST LA GRANGE MEMORIAL.....	23,154					23,154
ADVOCATE CHRIST MEDICAL CENTER.....	199,093	42,516	16,362	18,959	8,002	284,933
ADVOCATE CONDELL MEDICAL CTR.....	76,272					76,272
ADVOCATE GOOD SAMARITAN.....	96,632	2,278		4,609		103,519
ADVOCATE GOOD SHEPHERD HOSPITAL.....	4,117	3,799				7,916
ADVOCATE HOME HEALTH SERVICES.....	9,390	2,444				11,834
ADVOCATE HOME HEALTH SERVICE.....	8,703					8,703
ADVOCATE HOSPICE.....	2,474					2,474
ADVOCATE ILLINOIS MASONIC.....	105,276	16,236			2,352	123,864
ADVOCATE LUTHERAN GENERAL HOSPITAL.....	163,344	13,407	5,949			182,700
ADVOCATE NORTHSIDE HEALTH SYSTEM.....	7,298					7,298
ADVOCATE SOUTH SUBURBAN.....	5,505					5,505
ADVOCATE SOUTH SUBURBAN HOSPITAL.....	65,458			15,640	23,988	105,086
ADVOCATE TRINITY HOSPITAL.....	110,186	23,558		13,345	50,099	197,188
AIR EVAC EMS INC.....	8,478					8,478
AIR EVAC EMS INC BOONE COUNTY.....	5,038					5,038
AIZIK WOLF.....	5,400					5,400
ALAN C PETERSON MD.....	3,360					3,360
ALAN M SCARROW MD.....	5,851					5,851
ALDEN DES PLAINES REHAB.....					2,584	2,584
ALDEN NORTHMOOR REHAB.....	3,382					3,382
ALDEN POPLAR CREEK REHAB.....	3,499					3,499
ALDEN WATERFORD REHAB.....	11,638					11,638
ALEGENT HEALTH BERGAN MERCY.....	9,028					9,028
ALEGENT HEALTH IMMANUEL MED CT.....	40,168	6,760				46,928
ALEGENT HEALTH LAKESIDE HOSPITAL.....	40,285					40,285
ALEGENT HEALTH MENTAL HEALTH.....		10,705	5,511			16,216
ALEGENT HEALTH REHABILITATION.....		7,065				7,065
ALEGENT HLTH MIDLANDS HOSPITAL.....	38,880	3,932				42,811
ALEXANDER DIGENIS.....				2,571		2,571
ALEXIAN BROS LANS MANOR.....	3,449					3,449
ALEXIAN BROTHERS BEHAVIORAL.....	4,704					4,704
ALEXIAN BROTHERS MEDICAL CENTER.....			12,972			12,972



STATEMENT AS OF MARCH 31, 2012 OF THE Humana Health Plan, Inc.

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
ALEXIAN BROTHERS MEDICAL CTR.....	75,891	75,027	2,902			153,820
ALFRED KAHN III.....	4,157					4,157
ALI F ABDELAAL MD.....	2,460					2,460
ALICE DIALYSIS.....	9,658					9,658
ALL HEART HOME HEALTH AGENCY.....	2,401					2,401
ALLIANCE HEALTH CENTER.....		4,148	3,927			8,075
ALLIANCE HOME HEALTH.....	6,735					6,735
ALLPORT CLINIC LLC.....					26,400	26,400
ALPHA HEALTH & REHAB OF GREER.....	5,859					5,859
ALTA VIEW HOSPITAL.....	2,837					2,837
ALTAPOINTE HEALTH SYSTEMS.....	2,080					2,080
ALTON MEMORIAL HOSPITAL.....	14,305					14,305
AMBIENT HEALTHCARE OF GEORGIA INC.....	2,053					2,053
AMBULATORY SURGERY INC.....	2,117					2,117
AMEDISYS HOME HEALTH OF MISSOURI.....	2,048					2,048
AMEDISYS INC.....	57,728	4,700				62,428
AMEDYSIS INC.....	5,013					5,013
AMERICAN HEALTHCARE LLC.....	2,613					2,613
AMERICAN MEDICAL RESPONSE.....	4,476					4,476
AMERICAN MEDICAL RESPONSE DBA.....	2,304					2,304
AMERICAN NEUROMONITORING ASSOCIATION.....	3,125					3,125
AMERICAN SLEEP MEDICINE.....	2,860					2,860
AMG DIALYSIS CENTERS.....			3,731			3,731
AMIGO MOBILITY CENTER.....	3,988					3,988
AMISHI SAWLANI MD.....					80,801	80,801
AMISUB OF SOUTH CAROLINA.....	10,017					10,017
AMSURG SURGERY CENTER.....	4,029					4,029
AMY QUILLO.....	2,692					2,692
ANCHOR HOSPITAL.....	2,172					2,172
ANDERSON DIALYSIS CENTER.....	2,559					2,559
ANDREW DAMRON.....	2,531					2,531
ANESTHESIA ASSOCIATES OF CINCINNATI INC.....	6,057					6,057
ANESTHESIA ASSOCIATES OF KC PC.....	2,176					2,176
ANESTHESIA ASSOCIATES OF LOUISVILLE PSC.....	5,284	2,152				7,436
ANESTHESIA ASSOCIATES.....	2,040					2,040
ANESTHESIA ASSOC OF KC PC.....	2,943					2,943
ANESTHESIA MEDICAL ALLIANCE.....	2,426					2,426
ANESTHESIA SERVICES ASSOCIATES PLLC.....	6,153					6,153
ANESTHESIOLOGY CHARTERED.....	2,743					2,743
ANESTHESIOLOGY CONSULTANTS.....	3,586				11,704	15,290
ANMED HEALTH.....	118,554	19,536				138,090
ANSHUL B BAMROLIA MD.....	5,795					5,795
ANTELOPE DIALYSIS CENTER.....					3,217	3,217
ANURAG GUPTA MD.....	3,001					3,001
APRIA HEALTHCARE INC.....	23,040					23,040
ARH REGIONAL MEDICAL CENTER.....	2,802					2,802
ARIZONA REGIONAL MEDICAL.....	44,224					44,224
ARKANSAS CHILDRENS HOSPITAL.....	24,406					24,406
ARNOLD VARDIMAN.....	2,500					2,500
ARROWHEAD HOSPITAL.....	61,758	23,535				85,292
ARROYO GRANDE COMM HOSPITAL.....	7,556					7,556
ARVIND AHUJA.....				9,106		9,106
ASCENDANT MDX INC.....	2,754					2,754
ASHLEY HEALTH AND REHAB.....	4,527					4,527
ASHOK R PATEL MD.....	2,137					2,137
ASHTON PLACE HEALTH AND REHAB.....	2,308					2,308

STATEMENT AS OF MARCH 31, 2012 OF THE Humana Health Plan, Inc.

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

1 Account	Aging Analysis of Unpaid Claims					
	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
ASSOC ST JAMES RADIOLOGISTS.....					84,201	84,201
ASSURE HOME HEALTHCARE INC.....	2,768					2,768
ATHENS CONVALESCENT CENTER.....	4,128					4,128
ATHENS LIMESTONE HOSPITAL.....	6,910					6,910
ATHENS REGIONAL MEDICAL CENTER LLC.....					4,392	4,392
ATI PHYSIC AL THERAPY.....	3,826					3,826
ATRIUM MEDICAL CENTER.....	12,879					12,879
AUBURN REGIONAL MEDICAL CENTER.....	10,225					10,225
AUBURN REGIONAL MEDICAL CTR.....	17,968					17,968
AUDRAIN MEDICAL CENTER.....	5,339					5,339
AUDREY B ERMAN MD.....	2,122					2,122
AURORA BAYCARE MEDICAL CENTER.....	13,077					13,077
AURORA BEHAVIORAL HEALTHCARE TEMPE LLC.....	3,371					3,371
AURORA HEALTH CARE METRO INC.....	162,490	2,600				165,090
AURORA MEDICAL CENTER GRAFTON LLC.....	6,045					6,045
AURORA ORTHOPEDIC LABORATORIES.....	2,478					2,478
AURORA PSYCHIATRIC HOSPITAL.....	9,928					9,928
AURORA SHEBOYGAN MEMORIAL MEDICAL CENTER.....	13,555					13,555
AURORA WEST ALLIS MEDICAL CENTER.....	66,230					66,230
AUSTIN ANESTHESIA LLC.....	2,035					2,035
AUTUMN CARE OF SUFFOLK.....	5,789					5,789
AVALON HEALTH AND REHAB AT NOR.....		2,314				2,314
AVISTA ADVENTIST HOSPITAL.....	3,138	5,852				8,990
AZURA OF LAKEWOOD LLC.....	4,140					4,140
BANNER BAYWOOD HEART HOSPITAL.....		14,858			60,622	75,480
BANNER BAYWOOD MEDICAL CENTER.....	13,748	16,537			7,027	37,312
BANNER BOSWELL MEDICAL CENTER.....	68,732	2,545				71,277
BANNER DEL E WEBB MEDICAL.....	79,624	17,297				96,921
BANNER DESERT MEDICAL CENTER.....	43,747	2,068			10,585	56,400
BANNER DESERT SURGERY CENTER LP.....	3,253					3,253
BANNER ESTRELLA MEDICAL CENTER.....	58,298	19,606	2,576			80,480
BANNER GATEWAY MEDICAL CENTER.....	12,068	4,091				16,158
BANNER GOOD SAMARITAN MEDICAL.....	43,054	6,167			5,198	54,419
BANNER GOOD SAMARITAN MEDICAL CENTER.....	12,486					12,486
BANNER IRONWOOD MEDICAL CENTER.....	5,695					5,695
BANNER THUNDERBIRD BEHAVIORAL.....	9,421					9,421
BANNER THUNDERBIRD MED CENTER.....	61,620	9,685	2,484		10,361	84,149
BANNER THUNDERBIRD MEDICAL CENTER.....	37,194	16,249			5,766	59,209
BAPTIST CONVALESCENT CTR.....	2,233					2,233
BAPTIST EASLEY HOSPITAL.....	12,037	11,973				24,011
BAPTIST HEALTH MED CTR LITTLE ROCK.....	8,110					8,110
BAPTIST HEALTH MEDICAL CENTER.....	3,718					3,718
BAPTIST HOSPITAL.....	90,217	40,474				130,691
BAPTIST HOSPITAL EAST.....	125,273	4,752			6,737	136,762
BAPTIST HOSPITAL NORTHEAST.....	14,827					14,827
BAPTIST MEMORIAL MED CTR NLR.....	4,552					4,552
BAPTIST REGIONAL MEDICAL CENTER.....	5,732	3,693				9,425
BASSAM MATAR.....	5,234					5,234
BAXTER REG MED CENTER.....	8,067					8,067
BAY AREA PHYSICIANS SURGERY CENTER.....			5,862			5,862
BAYADA NURSES INC.....	2,720					2,720
BAYFRONT MEDICAL CENTER.....	9,161					9,161
BAYLOR ALL SAINTS MEDICAL CENTER.....	5,591					5,591
BAYLOR MEDICAL CENTER AT FRISCO.....	16,480					16,480
BAYLOR MEDICAL CTR AT CARROLLTON.....	6,984					6,984
BAYLOR REGIONAL MEDICAL.....	2,432					2,432

STATEMENT AS OF MARCH 31, 2012 OF THE Humana Health Plan, Inc.

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
BAYLOR UNIVERSITY MEDICAL CENTER.....		78,643				78,643
BEACON WEST SURGERY CENTER.....	2,810					2,810
BELLEVUE HOSPITAL CENTER.....		2,749				2,749
BELLIN MEMORIAL HOSPITAL INC.....	65,022					65,022
BELLIN PSYCHIATRIC CENTER.....		2,987				2,987
BELTON REGIONAL MEDICAL CENTER.....	14,998					14,998
BELTWAY SURGERY CENTER SPRING.....	3,164					3,164
BELTWAY SURGERY CENTERS.....	3,466					3,466
BENCHMARK HEALTHCARE OF HARRIS.....	4,447					4,447
BENCHMARK HEALTHCARE OF LEES.....		2,301				2,301
BENCHMARK HEALTHCARE OF RAYTOW.....	17,183					17,183
BENSON HOSPITAL.....	8,475					8,475
BENTON COUNTY DIALYSIS CENTER.....	4,161					4,161
BETHANY AT PACIFIC.....	9,009	3,443				12,452
BETHANY AT SILVER LAKE.....	2,834					2,834
BETHANY MEDICAL ASSOCIATES.....					115,370	115,370
BETHESDA HOSPITAL INC.....	59,582	6,052				65,633
BETHESDA NEONATOLOGIST.....					2,686	2,686
BHC FAIRFAX HOSPITAL.....	7,840					7,840
BHC PINNACLE POINTE HOSPITAL.....	2,765					2,765
BIG SPRINGS SPECIALTY CARE CENTER.....	6,305					6,305
BIRINDER MARWAH MD.....					58,001	58,001
BLOUNT MEMORIAL HOSPITAL.....	24,830	4,908	2,886			32,624
BLUE ASH DIALYSIS.....	14,560					14,560
BLUE RIVER REHABILITATION CTR.....	9,508					9,508
BLUEMOUND DIALYSIS.....	13,558					13,558
BMA WEST KINGSPORT.....				3,768		3,768
BMH TIPTON.....		9,738				9,738
BON SECOURS HOSPICE AND PALLIA.....	4,124					4,124
BON SECOURS MEMORIAL REGIONAL.....	23,154					23,154
BON SECOURS ST FRANCIS HEALTH.....	364,620					364,620
BONNER GENERAL HOSPITAL.....	15,635					15,635
BOTHELL HEALTH CARE.....		4,634				4,634
BOULDER COMMUNITY HOSPITAL.....	54,496					54,496
BRADFORD HOUSE NURSING AND REHAB.....	2,941					2,941
BRADLEY HEIGES.....	4,811					4,811
BRANDON REGIONAL HOSPITAL.....	69,794					69,794
BRENDA P NICHOLSON MD.....	2,137					2,137
BRENT T MCLAURIN MD.....	2,604					2,604
BRENTON R COGER MD.....	7,265					7,265
BRIAN BLACK.....	4,260					4,260
BRIAN C CHO MD.....					30,600	30,600
BRIAN CTR HEALTH & REHAB HENDERSONVILLE.....	3,141					3,141
BRIAN MANNION.....	4,152					4,152
BRIAN MCCARTY.....	3,095					3,095
BRIAN THORNTON.....	6,050		2,843			8,893
BRIAN WHITE.....	2,445					2,445
BRIDGEPORT HOSPITAL.....					62,707	62,707
BRISTOL REG MED CTR.....	40,170					40,170
BROOKESTONE MEADOWS INC.....	3,119	2,722				5,841
BROOKLINE DIALYSIS.....	8,312					8,312
BROOKSHIRE HEALTH CARE CENTER.....	4,145					4,145
BROOKSVILLE REGIONAL HOSPITAL.....	8,026					8,026
BROOKWOOD MEDICAL CENTER.....	4,168					4,168
BRUCE DOUTHIT.....	3,722					3,722

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
BRUCE FREEDMAN.....	2,021					2,021
BRYAN LGH MEDICAL CENTER EAST.....	5,521					5,521
BUFFALO PRAIRIE CARE CENTER.....	3,165					3,165
CAMPBELLSVILLE EMERGENCY MEDICINE.....	3,239					3,239
CANNON MEMORIAL HOSPITAL.....	10,402					10,402
CANYON TRANSITIONAL REHABILITATION.....	13,041					13,041
CAPITAL REGIONAL MEDICAL CENTER.....	14,969					14,969
CAPITOL CARE CENTER.....	12,209					12,209
CAPRI AT THE POINTE REHAB.....	2,400					2,400
CARILION GILES COMMUNITY HOSPITAL.....	22,963					22,963
CARILION NEW RIVER VALLEY.....	4,674					4,674
CARILION ROANOKE COMMUNITY HOSPITAL.....	4,930					4,930
CARILION ROANOKE MEMORIAL HOSPITAL.....	48,185					48,185
CARILION STONEWALL JACKSON.....	5,528					5,528
CARING NURSES HOME HEALTH.....	3,395					3,395
CARLE FOUNDATION HOSPITAL.....	4,560					4,560
CARMEL HEALTH & LIVING COMMUNITY.....	5,105					5,105
CARMEL HILLS HEALTHCARE.....	6,314					6,314
CAROLINAS MEDICAL CENTER.....		9,822				9,822
CAROLINAS MEDICAL CTR CMC.....	53,146					53,146
CARONDELET HEART AND VASCULAR.....	6,899	12,232		4,544		23,675
CARONDELET HOME CARE SERVICES.....	2,981					2,981
CARONDELET ST JOSEPHS HOSPITAL.....	47,609				2,193	49,802
CARONDELET ST MARYS HOSPITAL.....	11,073	5,770	14,385		11,321	42,548
CARRIE BOOHER.....	2,400					2,400
CARTER COOPER.....	4,550	4,345				8,895
CARTHAGE HEALTH & REHAB CENTER.....	11,698					11,698
CASCADE VALLEY HOSPITAL.....	6,384					6,384
CASS REGIONAL MEDICAL CENTER.....	5,983					5,983
CASS REGIONAL MEDICAL CENTER.....	27,212					27,212
CATALINA HEALTHCARE CENTER.....	3,655					3,655
CATHOLIC HEALTH PARTNERS SYS.....	98,746	3,048			3,191	104,984
CCS MEDICAL.....	2,319					2,319
CEDAR LAKE VILLAGE.....	17,469					17,469
CEDAR SPRINGS BEHAVIORAL HEALTH.....	2,127					2,127
CEDARS SINAI MEDICAL CENTER.....	135,525					135,525
CENTENNIAL HILLS HOSPITAL MEDICAL.....		71,021		4,544	374,728	450,293
CENTENNIAL SURGERY CENTER.....	3,283					3,283
CENTER FOR ORTHOTIC & PROSTHETIC CARE.....	2,305					2,305
CENTER FOR SPINAL SURGERY.....	9,086					9,086
CENTER ONE SURGERY CENTER.....	9,579					9,579
CENTERPOINT AMB SURGERY.....	2,155					2,155
CENTERPOINT MEDICAL CENTER.....	131,506	22,470			17,077	171,053
CENTERPOINT MEDICAL CENTER.....	89,255	3,960				93,215
CENTRAL BAPTIST HOSPITAL.....	94,059	13,713		3,021		110,792
CENTRAL DU PAGE HOSPITAL.....	4,233					4,233
CENTRAL DUPAGE HOSPITAL.....	118,277	3,457	20,372		49,149	191,256
CENTRAL VERMONT HOSPITAL.....	2,514	3,998				6,512
CENTRUM SURGICAL CENTER.....		3,279				3,279
CENTURA HOME CARE LLC.....	3,241					3,241
CEP AMERICA ILLINOIS PC.....					144,602	144,602
CHAD PRUSMACK.....	2,197					2,197
CHANDLER HEALTH CARE CTR.....	3,841					3,841
CHANDLER REGIONAL HOSPITAL.....	83,198				46,985	130,183
CHARLES FAMOYIN.....	2,269					2,269

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
CHARLES HANEY.....					2,072	2,072
CHESAPEAKE GENERAL HOSPITAL.....	28,985					28,985
CHEYENNE MOUNTAIN CARE AND REHAB.....		6,025				6,025
CHICAGO DE PT REV CFD EMS.....	5,642					5,642
CHILDRENS HOSP HOME HEALTH.....	35,550	2,941	4,484			42,975
CHILDRENS HOSPITAL.....	9,694					9,694
CHILDRENS HOSPITAL MEDICAL CENTER.....	419,233	10,924			100,567	530,725
CHILDRENS HOSPITAL OF WISCONSIN.....	11,104					11,104
CHILDRENS MEMORIAL HOSPITAL.....	13,239					13,239
CHILDREN'S MEMORIAL SPECIALTY.....	5,704					5,704
CHILDRENS MERCY HOSPITAL.....	7,028					7,028
CHRIST HOSPITAL.....	213,134	5,679			16,253	235,066
CHRIST HOSPITAL SPINE SURGERY CENTER.....	26,643					26,643
CHRISTIAN HEALTH AND REHABILITATION.....	12,293					12,293
CHRISTIAN HOSPITAL.....	7,188					7,188
CHRISTOPHER JONES.....	2,562					2,562
CHRISTOPHER MCPHERSON.....	5,149					5,149
CHRISTOPHER POLLOCK.....	11,486					11,486
CHRISTOPHER STURM.....	5,823					5,823
CHRISTOPHER TOMARAS.....	6,788					6,788
CHRISTOPHER WOLFLA.....		2,261				2,261
CHRISTUS SPOHN CC MEMORIAL HOSPITAL.....	5,732					5,732
CHRISTUS SPOHN KLEBERG MEMORIAL.....	2,251					2,251
CHS INC FULD CAMPUS.....	32,993					32,993
CINCINNATI VAMC.....	5,856					5,856
CITIZENS MEMORIAL HEALTH CARE.....	2,924					2,924
CITIZENS MEMORIAL HOSPITAL.....	7,440					7,440
CITRONELLE CONVALESCENT CENTER.....	3,603					3,603
CITY OF PH OENIX ETS.....	2,396					2,396
CJW MEDICAL CENTER.....	197,371		2,615			199,986
CLAIRBORNE COUNTY HOSPITAL.....	5,583					5,583
CLARIAN HEALTH NORTH LLC.....	16,998					16,998
CLARIAN HEALTH WEST LLC.....	6,794					6,794
CLARK MEMORIAL HOSPITAL.....	36,048	2,045			29,955	68,048
CLARK PHYSICIAN GROUP LLC.....	2,060					2,060
CLARK REGIONAL MEDICAL CENTER.....	6,009					6,009
CLARK SURGICAL ASSISTING LLC.....	3,776					3,776
CLEVELAND CLINIC FOUNDATION.....	11,844					11,844
CLINT HILL.....	6,362	6,278				12,640
COASTAL CAROLINA MEDICAL CENTER.....	8,689					8,689
COLORADO SPRINGS IMAGING LLC.....	2,474					2,474
COLUMBIA ST MARYS HOSPITAL MILWAUKEE INC.....	25,042					25,042
COMMUNITY ALLIANCE HOME HLTH.....	6,264					6,264
COMMUNITY HOME HEALTH SERVICES.....	4,780					4,780
COMMUNITY HOSPITAL.....	4,017					4,017
COMMUNITY HOSPITAL ANDERSON.....	10,438					10,438
COMMUNITY HOSPITALS OF IN INC.....	20,219					20,219
COMMUNITY MEMORIAL HOSPITAL.....	10,642					10,642
CONTINIUMCARE OF WEBER CITY.....	4,839					4,839
COPLEY MEMORIAL HOSPITAL.....	122,577				12,941	135,518
COPPER QUEEN COMMUNITY HOSPITAL.....	14,654					14,654
CORAM ALTERNATE SITE SERVICES.....	20,853					20,853
CORAM HEALTHCARE.....	43,289					43,289
CORNERSTONE HOSP OF SE ARIZONA.....	44,479					44,479
CORNERSTONE OF RECOVERY INC.....	3,610					3,610
CORONADO HEALTHCARE CENTER.....	3,062					3,062

STATEMENT AS OF MARCH 31, 2012 OF THE Humana Health Plan, Inc.

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
COTTONWOOD SURGERY CENTER LLC.....	3,449					3,449
COUNTRYSIDE CARE CENTRE.....					2,112	2,112
COUNTRYSIDE MANOR HEALTH & LIVING.....	3,199					3,199
COUNTY RESCUE SERVICES INC.....	2,053					2,053
COVINGTON COURT HEALTH.....	3,045					3,045
CREIGHTON UNIVERSITY MEDICAL.....	24,151	12,634				36,786
CRITTENTON HOSPITAL MEDICAL CENTER.....	2,290					2,290
CROWNE HEALTH CARE OF MOBILE.....	4,505					4,505
CUMBERLAND HEIGHTS TREATMENT CENTER.....		3,300				3,300
CUSHING MEMORIAL HOSPITAL.....	10,458					10,458
DALE HORNE.....		7,162				7,162
DANIEL JOHNSTON.....	6,891					6,891
DAVID A YATES & ASSOC INC.....	2,426					2,426
DAVID DORSEY.....	6,108					6,108
DAVID FRIEDLAND.....	2,348					2,348
DAVID HAWK.....		3,028				3,028
DAVID M CHRISTENSEN MD.....	4,382					4,382
DAVID NIEMANN.....	3,214					3,214
DAVID STARCH.....	3,666					3,666
DAY SURGERY FACILITIES.....	5,874		5,659		99,556	111,088
DCA BERWYN.....	53,899					53,899
DCA CRESTWOOD.....	9,918	24,700				34,618
DCA OF CINCINNATI LLC.....					6,997	6,997
DCA SKOKIE.....	37,471					37,471
DCI RENAL SERVICES OF PITTSBURGH.....			10,620			10,620
DEACONESS HOSPITAL INC.....	24,010	6,685				30,695
DEACONESS MEDICAL CENTER.....	6,501					6,501
DECATUR TOWNSHIP CARE AND REHAB.....	3,071					3,071
DEHLI DIALYSIS.....	10,408					10,408
DEKALB MEMORIAL HOSPITAL.....	6,402					6,402
DELMAR GARDENS.....	9,397					9,397
DELNOR COMMUNITY HOSPITAL.....	2,273					2,273
DENNIS D NICHOLS MD.....	2,463					2,463
DEPARTMENT OF OPHTHALMOLOGY.....					2,399	2,399
DEPT OF VETERANS AFFAIRS.....	11,124					11,124
DESERT SPRINGS HOSPITAL MEDICAL.....					749,636	749,636
DESERT SPRINGS HOSPITAL MEDICAL CENTER.....	8,247					8,247
DESERT VIEW REGIONAL MEDICAL.....	6,596		5,171		3,743	15,509
DETAR HOSPITAL.....	8,571					8,571
DIAGNOSTIC IMAGING ASSOCIATES.....					68,001	68,001
DIAGNOSTIC X RAY PHYSICIANS PSC.....	2,038					2,038
DIALYSIS CTRS OF AMERICA PRAIRIE.....	18,334	19,744				38,078
DIALYSIS SVS WILLOWBROOK.....	9,257					9,257
DIAMOND HEALTH & REHAB.....	3,902					3,902
DICKINSON COUNTY MEMORIAL HOSPITAL.....	9,806					9,806
DIGITRACE CARE SERVICES INC.....	2,136					2,136
DIRECT DIALYSIS.....	20,793					20,793
DISCOVER V ISION CENTERS.....					2,585	2,585
DJO LLC.....	3,759					3,759
DMG SURGICAL CENTER LLC.....	2,806					2,806
DMITRY S RUBAN MD.....	4,906					4,906
DOOR COUNTY MEMORIAL HOSPITAL.....	5,577					5,577
DOUGLAS FEHRMAN.....	2,723					2,723
DOUGLAS FLORA.....	2,620					2,620
DR P PHILLIPS HOSPITAL.....	2,940					2,940
DRAKE HOSPITAL.....	17,396					17,396

STATEMENT AS OF MARCH 31, 2012 OF THE Humana Health Plan, Inc.

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
DREYER AMBULATORY SURGERY.....	4,324					4,324
DUPONT HOSPITAL.....	3,390					3,390
EAST TAMPA DIALYSIS.....	4,626					4,626
EAST TENNESSEE CHILDRENS HOSPITAL.....	8,064					8,064
EASTERN STATE HOSPITAL.....	3,142					3,142
EASTGATE HOME TRAINING.....		4,276				4,276
EDGEPAK MEDICAL SUPPLIES.....	4,304					4,304
EDGEWOOD MANOR.....	4,176					4,176
EDINBURG KIDNEY CENTER.....	38,269					38,269
EDWARD HOSPITAL.....	51,465					51,465
EDWARD HOSPITAL EMERGENCY MDS.....	3,171					3,171
ELIZABETHTOWN EMERGENCY PHYSICIANS.....	2,284					2,284
ELK GROVE LAB PHYSICIANS.....					43,000	43,000
ELKE D AIPPERSBACH MD.....					2,352	2,352
ELMHURST ANESTHESIOLOGISTS PC.....					14,319	14,319
ELMHURST MEMORIAL HEALTH SYSTEM.....					12,500	12,500
ELMHURST MEMORIAL HOSPITAL.....	45,248	12,077			17,102	74,427
ELMS HAVEN CARE AND REHABILITATION.....	3,277					3,277
EMERGENCY MEDICAL ASSOCIATES.....	2,048					2,048
EMORY JOHNS CREEK HOSPITAL.....	33,929					33,929
ENGLEWOOD COMMUNITY HOSPITAL INC.....	21,471					21,471
ENVOY OF WESTOVER HILLS.....	7,429					7,429
EPHRAIM MCDOWELL REG MED CTR.....	20,283					20,283
EPMG OF ILLINOIS SC.....	3,174					3,174
ESTES PARK MEDICAL CENTER.....	2,595					2,595
EUGENE Y CHEN MD.....					3,600	3,600
EUREKA SPRINGS HOSPITAL HOMECARE.....	7,965					7,965
EVANGELICAL HOSPITAL CORP.....	55,457		4,648		181,644	241,748
EVENDALE MEDICAL CENTER LLC.....					17,609	17,609
EVERETT TRANSITIONAL CARE SERVICE.....	8,436					8,436
EVERGREEN AT TACOMA LLC.....	6,627					6,627
EXALTED HEALTH & REHAB.....	5,716					5,716
EXCELSIOR SPRINGS MEDICAL CTR.....	2,919					2,919
EXEMPLA GOOD SAMARITAN.....	7,556					7,556
EXEMPLA LUTHERAN MEDICAL CENTER.....	30,153	32,655				62,808
EXEMPLA LUTHERAN MEDICAL CTR.....	27,411	2,420				29,830
FAIRBANKS HOSPITAL INC.....	4,439					4,439
FAIRFIELD HOME TRAINING DIALYSIS.....	10,342					10,342
FAIRMONT CARE CENTER.....					4,293	4,293
FALGUNI AMIN ZIMMERMAN.....	2,456					2,456
FATIMA MOHIUDDIN.....					31,000	31,000
FAYETTEVILLE HEALTH & REHAB.....	4,577					4,577
FELLOWSHIP HEALTH & REHAB.....	5,149					5,149
FINR III LLC.....	2,380					2,380
FIRSTCALL HOMECARE.....	3,226					3,226
FL INSTITUTE FOR NEURO REHAB.....	3,339					3,339
FLAGET MEMORIAL HOSPITAL.....	9,519				2,521	12,040
FLAGLER HOSPITAL INC.....					13,568	13,568
FLAGSTAFF MEDICAL CENTER.....		20,059				20,059
FLORIDA CENTER FOR RECOVERY.....					2,331	2,331
FLORIDA HOSPITAL AT CONNERTON.....	29,240					29,240
FLORIDA HOSPITAL CARROLLWOOD.....	15,527					15,527
FLORIDA HOSPITAL CENTRE CARE.....					55,801	55,801
FLORIDA HOSPITAL TAMPA.....	25,569					25,569
FLORIDA OR THOPAEDIC INSTITUTE.....	2,980					2,980
FLORIDA ORTHOPAEDIC INSTITUTE.....	12,726					12,726

STATEMENT AS OF MARCH 31, 2012 OF THE Humana Health Plan, Inc.

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
FLOYD MEDICAL CENTER.....	32,151					32,151
FLOYD MEMORIAL HOSPITAL.....	38,574	4,600				43,175
FMC DIALYSIS SERVICES BURBANK.....	33,845					33,845
FMC OF LAKE BLUFF.....	7,490					7,490
FOREST VILLA NURSING & REHAB.....	2,968					2,968
FORT HAMILTON HOSPITAL.....	6,646					6,646
FORUM AT TUCSON.....	2,844					2,844
FOSS HOME & VILLAGE.....		5,057				5,057
FOUNTAIN VIEW VILLAGE.....	4,314					4,314
FOXWOOD SPRINGS.....	2,664					2,664
FRANCESCO MANGANO.....	2,977					2,977
FRANCISCAN HAMMOND CLINIC LLC.....	3,312					3,312
FRANCISCAN HEALTHCARE CENTER.....	3,951					3,951
FRANCISCAN PHYSICIAN HOSPITAL.....	31,817	3,113				34,930
FRANCISCAN ST JAMES HTLH.....	99,800	5,969			3,198	108,967
FRANCISCAN ST MARGARET HEALTH.....	4,949	2,969				7,918
FRANCISCAN ST MARGARET HLTH.....	64,995					64,995
FRANCISCO GUITIERREZ.....	2,770					2,770
FRANCISCO J ESPINOSA MD.....	3,006					3,006
FRANK CASTRO.....	4,740					4,740
FRANKFORT REG MED CTR.....	2,009					2,009
FRANKLIN WOODS COMMUNITY HOSPITAL.....	2,493					2,493
FRAZIER REHAB INSTITUTE.....	24,342					24,342
FREDERICK ALBRINK.....	2,109					2,109
FREDERICK M TIESENGA MD.....	2,051					2,051
FREEDOM PLAZA CARE CENTER.....	2,815					2,815
FREEMAN HOSPITAL.....	19,886					19,886
FREEMAN NEOSHO HOSPITAL.....	4,186					4,186
FRESENIUS MEDICAL CARE.....	7,044					7,044
FROEDTERT MEMORIAL LUTHERAN HOSPITAL.....	54,730	3,854				58,584
FRONT RANGE ORTHOPAEDICS PC.....	2,203					2,203
FT SANDERS REGIONAL INFUSION SERVICES.....					4,892	4,892
FT SANDERS REGIONAL MEDICAL CENTER.....	55,665					55,665
FULLERTON KIMBALL MEDICAL GRP.....					70,161	70,161
GARDEN TERRACE OVERLAND PARK.....	3,067					3,067
GARDEN VALLEY NURSING.....	4,267					4,267
GASSVILLE NURSING CENTER.....	2,045					2,045
GASTON MEMORIAL HOSPITAL.....	16,747					16,747
GATEWAY AT FLORENCE REHABILITATION.....					6,635	6,635
GATEWAY FOUNDATION.....	3,609					3,609
GENERAL FACILITY SERVICES.....	18,750					18,750
GENERAL PHYSICIAN SERVICES.....	38,300					38,300
GENTIVA HEALTH SERVICES.....	31,696	7,803	2,068			41,567
GEOFFREY L BLATT MD.....	3,419					3,419
GEORGE K BOVIS MD.....	18,606					18,606
GEORGE KOURIS.....	4,200					4,200
GEORGE WASHINGTON UNIVERSITY HOSPITAL.....	3,126					3,126
GERALD J MINGOLELLI MD.....	3,797					3,797
GERARD ADLER.....	2,483					2,483
GGNSC INDEPENDENCE II LLC.....	14,522					14,522
GHASSAN ZALZALEH.....					2,144	2,144
GILBERT HOSPITAL.....	4,619					4,619
GLENSHIRE NURSING & REHAB.....	2,592					2,592
GLENVIEW TERRACE NURSING CTR.....	3,087				3,183	6,271
GOLDEN LIVINGCENTER-BRIARWOOD.....	2,350					2,350



STATEMENT AS OF MARCH 31, 2012 OF THE Humana Health Plan, Inc.

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
GOLDEN LIVINGCENTER-CAMELOT.....	2,264					2,264
GOLDEN LIVINGCENTER-ELIZABETH.....	2,947	4,790				7,736
GOLDEN LIVINGCENTER-FOLEY.....	5,596	3,324				8,920
GOLDEN LIVINGCENTER-KAW RIVER.....	4,725			4,197		8,922
GOLDEN LIVINGCENTER-SMITHVILLE.....	12,795					12,795
GOLDEN LIVINGCENTER-SPRING HIL.....	2,808					2,808
GOLDEN LIVINGCENTER-WESTWOOD.....	2,737					2,737
GOLDEN LIVINGCENTER-WOODLANDS.....		4,113				4,113
GOOD SAMARITAN HOSPITAL.....	133,772	6,604				140,376
GOOD SHEPHERD MEDICAL CENTER-MARSHALL.....	2,143					2,143
GORDON L GRADO MD.....	13,141					13,141
GOTTLIEB MEMORIAL HOSPITAL.....	111,357	3,639	3,698		6,813	125,507
GRACE VILLAGE HEALTHCARE FACILITY.....	2,229					2,229
GRANDVIEW DIALYSIS.....	2,120					2,120
GREENVIEW REGIONAL HOSPITAL.....	2,804					2,804
GREENVILLE GENERAL HOSPITAL.....	20,174					20,174
GREENVILLE HOSPITAL SYSTEM.....	11,243					11,243
GREENVILLE MEMORIAL HOSPITAL.....	452,353	80,410				532,763
GREENVILLE MEMORIAL MEDICAL.....	9,372					9,372
GREER MEMORIAL HOSPITAL.....	56,268					56,268
GREGORIO M TOLENTINO JR MD.....	2,591					2,591
GREGORY FOLSOM.....		3,240				3,240
GREGORY LANFORD.....	2,396					2,396
GREGORY NAZAR.....	3,825					3,825
GROVE HILL MEMORIAL HOSPITAL.....	8,790					8,790
GROVE NORTH LIVING & REHAB CTR.....					3,516	3,516
GROVE OF LA GRANGE LIVING.....		2,925				2,925
GSP SURGICAL ASSISTANTS INC.....	2,400					2,400
GSS - LOVELAND VILLAGE.....	3,420	4,221				7,641
GSS-OLATHE.....	11,593					11,593
GUARDIAN ANESTHESIA ASSOCIATES.....	3,300					3,300
H LEE MOFFITT CANCER CENTER.....	33,134					33,134
HALLMARK MANOR.....	2,719					2,719
HAMAD I FARHAT MD.....		2,136				2,136
HANS GOESTER MD.....	2,275					2,275
HARBIN CLINIC LAB.....		2,197				2,197
HARDIN MEMORIAL HOSPITAL.....	4,890					4,890
HARESH B SAWLANI.....					28,000	28,000
HARLAN ARH.....	19,428				13,857	33,285
HARMONY NURSING & REHAB CENTER.....	6,769	3,389				10,158
HARRISON COUNTY HOSPITAL.....					4,046	4,046
HARRISON MEDICAL CENTER.....	2,471					2,471
HARRISON MEMORIAL HOSPITAL.....	8,332					8,332
HAYASU REGIONAL MEDICAL CENTER.....	7,461					7,461
HAVEN BEHAVIORAL SENIOR CARE.....	5,185				11,238	16,423
HAVEN SENIOR HORIZON.....	2,413					2,413
HAWKINS CO MED CTR.....	2,091					2,091
HAZEL CREST RENAL CENTER.....	22,732					22,732
HEALTH DIAGNOSTIC LABORATORY INC.....	2,969					2,969
HEALTHEAST ST JOSEPHS HOSPITAL.....	21,182					21,182
HEALTHSOUTH NORTHERN KENTUCKY.....	7,591					7,591
HEALTHSOUTH REHAB HOSPITAL.....	5,836					5,836
HEALTHSOUTH REHABILITATION HOSPITAL.....	23,567				7,589	31,156
HENDERSON COUNTY COMM HOSPITAL.....	3,330					3,330
HENNEPIN COUNTY MEDICAL CENTER.....	5,040					5,040

STATEMENT AS OF MARCH 31, 2012 OF THE Humana Health Plan, Inc.

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
HENRICO DOCTORS HOSPITAL.....	192,597	10,226				202,822
HENRY EISERLOH III.....					2,181	2,181
HERME O SYLORA.....					33,160	33,160
HESAMM GHARAVI.....		2,631				2,631
HIDDEN LAKE CARE CENTER.....		4,041				4,041
HIGH FIELD AND OPEN MRI.....	2,180					2,180
HILLCREST HEALTH & REHAB.....	5,109					5,109
HILLHAVEN.....					35,694	35,694
HINES VAMC.....	3,219					3,219
HINSDALE ANESTHESIA ASSOC LTD.....					2,301	2,301
HLG ANES ASSOCIATES LLC.....					15,094	15,094
HOLSTON VALLEY MED CTR.....	16,320					16,320
HOLY CROSS HOSPITAL.....	31,917				32,238	64,155
HOLY FAMILY MEDICAL CENTER.....	5,242					5,242
HOME NURSING WITH HEART PC.....	3,280					3,280
HOMESTEAD HOSPITAL INC.....	2,181					2,181
HOSPICE OF CINCINNATI.....	2,765					2,765
HOSPITALIS TS OF AR.....	2,512					2,512
HOWARD COUNTY GENERAL HOSPITAL.....	15,863					15,863
HUEY TIEN.....	2,065					2,065
HUGH GLOSTER JR.....	3,093					3,093
HUMBOLDT RIDGE DIALYSIS.....	17,141					17,141
HUNTSVILLE HOSP BEHAVIOR CTR.....	2,353					2,353
HUNTSVILLE HOSPITAL.....	151,736	12,548				164,284
IAN RODWAY.....	2,097	4,177				6,274
IDAHO ELKS REHABILITATION HOSP.....	11,874					11,874
IHHI DBA INFIRMARY WEST.....	31,722					31,722
IL DEPT OF HEALTHCARE & FAMILY.....	29,384					29,384
ILLINOIS D EPT OF HEALTHCARE.....	14,250					14,250
ILLINOIS DEPT OF HEALTHCARE.....	2,079					2,079
IMELDIA SIA MD SC.....					28,600	28,600
INDEPENDENT ANESTHESIOLOGISTS PSC.....	3,316					3,316
INDIAN PATH MEDICAL CENTER.....	111,992					111,992
INDIANA HEART HOSPITAL.....	19,799					19,799
INDIANA UNIVERSITY HEALTH.....	5,656		2,270			7,927
INDIANA UNIVERSITY HEALTH INC.....	54,001					54,001
INFIRMARY WEST - LTAC.....	3,307					3,307
INFUSION PARTNERS OF LEXINGTON.....		2,726				2,726
INGALLS FA MILY CARE.....	2,713					2,713
INGALLS MEMORIAL HOSPITAL.....	47,136	9,566				56,703
INNISFREE HEALTH AND REHAB LLC.....	4,512					4,512
INNOVATIVE SENIOR CARE.....	8,227					8,227
INNOVATIVE SENIOR CARE.....	4,235					4,235
INTERIM HEALTHCARE OF GREENVILLE.....	8,853					8,853
INTERIM HEALTHCARE OF KC INC.....	3,444					3,444
INTERMOUNTAIN MEDICAL CENTER.....		3,424				3,424
IOWA LUTHERAN HOSPITAL.....	4,532					4,532
IVY COURT.....	3,439					3,439
JACKSON COUNTY MEMORIAL HOSPITAL.....	5,201					5,201
JACKSON PARK DIALYSIS CENTER.....	7,398					7,398
JACKSON PARK HOSPITAL.....	60,189					60,189
JACKSON PURCHASE MEDICAL CTR.....	17,065	2,856				19,921
JAMES A SCOWCROFT MD.....	2,994					2,994
JAMES B HAGGIN MEMORIAL HOSPITAL.....	2,641					2,641
JAMES CAIN.....		9,348				9,348
JAMES GRAMM.....	4,523					4,523

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
JAMES RIVER CARE AND REHAB CENTER.....	3,639					3,639
JAMESTOWN NURSING AND REHAB.....	12,062					12,062
JANE PHILLIPS MEDICAL CENTER.....	4,322					4,322
JANET CHIN MD.....	2,080					2,080
JASON HARROD.....	2,874					2,874
JAWEED SAYEED MD.....	3,585					3,585
JEAN SCHUMAKER.....	2,141					2,141
JEFFREY KLOPFENSTEIN.....	3,909					3,909
JEFFREY MEINCKE REZA.....	8,464					8,464
JEFFREY SUSSMAN.....	2,321					2,321
JEFFREY T MACMILLAN MD.....	2,681					2,681
JENNIFER BESTLAND.....	5,473					5,473
JENNIFER HOER MD.....		46,361				46,361
JESSE BROWN VAMC.....	2,510					2,510
JESSICA KELDERMAN.....		2,938				2,938
JEWISH HOSPITAL SHELBYVILLE.....	14,032					14,032
JEWISH HOSPITAL INC.....	156,517	13,044				169,561
JEWISH HOSPITAL LLC.....	38,261					38,261
JEWISH HOSPITAL SHELBYVILLE.....	5,848					5,848
JEWISH HOSPITAL/ST MARYS HEALTH.....	5,310	72,330				77,640
JH STROGER HOSPITAL OF COOK.....	12,304					12,304
JHU NEUROSURGERY.....		4,630				4,630
JOHN BERRY MD.....	16,918					16,918
JOHN BERSHOF.....	2,100					2,100
JOHN BIBB.....			2,997			2,997
JOHN C LINCOLN HOSPITAL.....	3,841					3,841
JOHN C LINCOLN HOSPITAL DEER.....	23,211					23,211
JOHN C LINCOLN HOSPITAL NORTH.....	99,607		5,736		2,558	107,900
JOHN C LINCOLN HOSPITAL NORTH MOUNTAIN.....	12,770					12,770
JOHN COWAN JR.....	3,398					3,398
JOHN F HALL MD.....	3,445					3,445
JOHN GUARNASCHELLI.....	2,417					2,417
JOHN HARPRING.....					2,231	2,231
JOHN L CHU MD.....	2,331					2,331
JOHN LIVERMORE.....	8,448					8,448
JOHN MCGUIRE.....		3,572				3,572
JOHN PAK.....	2,181					2,181
JOHN TEW JR.....	2,198					2,198
JOHNSON CITY MED CTR HOSP INC.....		5,885				5,885
JOHNSON CITY MEDICAL CENTER.....	36,326					36,326
JOHNSTON MEMORIAL HOSPITAL.....	18,940					18,940
JONATHAN BORDEN.....	6,087				4,129	10,216
JONATHAN WEISER.....	2,800					2,800
JOSE A MENENDEZ MD.....	2,066					2,066
JOSEPH BEST.....	2,122					2,122
JOSEPH FINIZIO.....	2,520					2,520
JOSEPH WERNER JR.....	2,299					2,299
JOSEPH YAZDI.....	2,141					2,141
JOSHUA ABRAMS DO.....	4,638					4,638
JOSHUA D HORNIG MD.....		3,337				3,337
JOSHUA HUSS.....				4,039		4,039
JOSHUA J MCFARLANE MD.....	2,900					2,900
JUAN TELLEZ MD.....					58,801	58,801
K JOSEPH PHILIP MD.....	8,355	3,759				12,114
KAI UWE LEWANDROWSKI MD.....	2,997					2,997
KANSAS CITY ORTHOPAEDIC INSTITUTE.....	22,008					22,008

STATEMENT AS OF MARCH 31, 2012 OF THE Humana Health Plan, Inc.

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

1 Account	Aging Analysis of Unpaid Claims					
	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
KANSAS CITY PRESBYTERIAN MANOR.....	3,710					3,710
KATHLEEN ESSENBERG.....	4,059					4,059
KATTULLE EATON.....	2,827					2,827
KCI USA.....	11,360					11,360
KEITH A SCHIFF MD.....					3,380	3,380
KEITH B HANNI MD.....	2,090					2,090
KEITH OSBORN.....					4,823	4,823
KELBIE B ABERCROMBIE PA.....	2,053					2,053
KEMP SURGERY CENTER.....	8,607					8,607
KENDALL HANSEN.....	2,618					2,618
KENNETH REICHERT II.....	3,362					3,362
KENTUCKY KDMS.....					4,516	4,516
KETTERING MEDICAL CENTER SYCAMORE.....		6,745				6,745
KEVIN KELLY.....	9,170					9,170
KEVIN MCCHORD.....	2,801					2,801
KEVIN OKOON.....	2,147					2,147
KIDNEY CENTER OF LAKEWOOD.....	14,330					14,330
KIDNEY CENTER OF WESTMINSTER.....	7,955					7,955
KIERNAN EXTENDED CARE.....					23,647	23,647
KIMATHI DOSS.....			2,480			2,480
KINDRED HOSPITAL ALBUQUERQUE.....		13,526				13,526
KINDRED HOSPITAL CENTRAL TAMPA.....	24,274					24,274
KINDRED HOSPITAL DENVER.....	20,736	11,593				32,329
KINDRED HOSPITAL KANSAS CITY.....	530,802	80,825				611,627
KINDRED HOSPITAL LOUISVILLE.....	41,387					41,387
KINDRED HOSPITAL NORTHLAND.....	20,416	110,316				130,732
KINDRED HOSPITALS TUCSON.....	12,245					12,245
KINDRED NURS & REHAB-NAMPA.....	2,127					2,127
KINDRED TRANSITIONAL CARE.....	3,329					3,329
KINDRED TRANSITIONAL CARE & REHAB.....	6,938					6,938
KINDRED TRANSITIONAL CARE.....	3,821					3,821
KINDRED TRANSITIONAL CARE.....	16,527					16,527
KINGMAN REGIONAL MEDICAL CENTER.....	3,129	12,568			13,232	28,928
KINGS DAUGHTERS HOSPITAL.....	4,360					4,360
KINGS DAUGHTERS MEDICAL CENTER.....	8,247					8,247
KINGS MOUNTAIN HOSPITAL.....	12,660					12,660
KISSIMEE DIALYSIS.....	10,673					10,673
KOOTENAI MEDICAL CENTER.....	48,712	3,336				52,048
KOSAIR CHILDRENS HOSPITAL.....	21,689	24,440		9,829		55,959
KOSCIUSKO COMMUNITY HOSPITAL.....	17,764					17,764
KRISTEN MASKALA.....	2,510					2,510
KY DEPT FOR MEDICAID SERVICE.....	25,043	2,765				27,808
L E COX MEDICAL CENTERS.....	20,352			8,845		29,197
LA CANADA CARE CENTER.....	2,204					2,204
LABCORP OF AMERICA HOLDINGS.....	21,299					21,299
LACROSSE HEALTH AND REHABILITATION.....	5,879					5,879
LADERA CARE AND REHABILITATION.....	2,010					2,010
LAFAYETTE REGIONAL HEALTH CTR.....	11,414	3,505				14,919
LAKE CUMBERLAND REGIONAL HOSPITAL.....	44,272					44,272
LAKELAND REGIONAL MEDICAL CENTER.....	14,754	9,809				24,563
LAKEVIEW VILLAGE INC.....	31,891	13,076				44,967
LARGO MEDICAL CENTER.....	2,499					2,499
LARRY DODGE.....	3,413					3,413
LARRY ZHOU.....	2,226					2,226
LAS VEGAS HEALTHCARE AND REHAB.....					12,905	12,905
LASTING HOPE BMMC.....	2,239					2,239

STATEMENT AS OF MARCH 31, 2012 OF THE Humana Health Plan, Inc.

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
LAUREATE PSYCH CLINIC & HOSPITAL.....	2,592					2,592
LAWRENCE BRENNAN.....	5,388					5,388
LAWRENCE GOTTLIEB.....	7,738					7,738
LAWRENCE GROSS.....	2,954					2,954
LAWRENCE MEMORIAL HOSPITAL.....	2,955					2,955
LCC OF GRANDVIEW.....	12,170					12,170
LCC OF KANSAS CITY.....	11,303					11,303
LECONTE MEDICAL CENTER.....	4,981					4,981
LEE MEMORIAL HOSPITAL.....	2,462					2,462
LEES SUMMIT MEDICAL CENTER.....	48,667	13,168				61,834
LEGACY SALMON CREEK HOSPITAL.....	4,223					4,223
LEONARD J CERULLO MD.....					45,870	45,870
LESLIE HEFFFEZ.....	4,301					4,301
LEWIS GALE MEDICAL CENTER.....	5,043	21,103				26,146
LEWIS MEMORIAL CHRISTIAN.....	14,822					14,822
LEXINGTON CLINIC.....	2,264					2,264
LEXINGTON COUNTRY PLACE.....	4,040					4,040
LEXINGTON HC CNT CHICAGO RIDGE.....	4,679	4,245				8,924
LEXINGTON HC CNTR LAGRANGE.....	4,992	4,050				9,042
LEXINGTON HC CNTR LOMBARD.....	2,343					2,343
LEXINGTON MEDICAL CENTER.....	5,211					5,211
LIBERTY DIALYSIS KENWOOD.....	10,227					10,227
LIBERTY DIALYSIS LLC.....	8,399					8,399
LIBERTY HOSPITAL.....	49,636					49,636
LIBERTY TERRACE HEALTHCARE.....	12,782					12,782
LIFE CARE CENTER OF GREELEY.....	4,432	9,505				13,937
LIFE CARE CENTER OF NORTH GLEN.....	2,618					2,618
LIFE CARE CENTER OF TUCSON.....	7,081					7,081
LIFE CARE CENTER OF WESTMINSTE.....	6,547					6,547
LIFE CARE CENTER SCOTTSDALE.....	9,053					9,053
LIFECARE CENTER OF CO SPRNGS.....	7,385					7,385
LIFEPOINT HOSPITALS HOLDINGS.....	3,147					3,147
LIFEWATCH SERVICES INC.....	2,825					2,825
LINCOLN PARK PHYSICAL THERAPY.....					46,161	46,161
LINDEN GROVE.....	2,977					2,977
LINDNER CENTER OF HOPE.....	12,901	17,570				30,471
LINKIA LLC.....	3,830					3,830
LISA SHNAYDER.....	4,866					4,866
LITTLE CO OF MARY HOSPITAL.....	45,678					45,678
LITTLE COMPANY OF MARY.....	7,394					7,394
LITTLE COMPANY OF MARY HOSPITAL.....					4,051	4,051
LITTLETON ADVENTIST HOSPITAL.....	16,799					16,799
LLC OF MARYSVILLE.....	9,965					9,965
LLC OF POST FALLS.....	7,489					7,489
LONGMONT UNITED HOSPITAL.....	2,683	11,268				13,951
LOOMIS ROAD DIALYSIS.....	15,821					15,821
LOOP RENAL CENTER.....	15,315					15,315
LOVELACE HOSP DOWNTOWN.....	9,454	3,261				12,715
LOVELACE HOSP WOMENS.....	17,211	12,901				30,111
LOWELL BARROW MD.....					12,391	12,391
LOYOLA UNI V MEDICAL CTR.....	2,414					2,414
LOYOLA UNIVERSITY MED CTR.....	61,520	47,789	6,168		2,183	117,660
LUMC HOME CARE & HOSPICE.....		7,221			10,798	18,020
LUTHERAN HOSPITAL.....	23,452	8,224				31,675
LUTHERAN NURSING HOME.....		4,073				4,073

STATEMENT AS OF MARCH 31, 2012 OF THE Humana Health Plan, Inc.

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
LYNWOOD NURSING HOME.....	2,212					2,212
MACNEAL HOSPITAL.....	325,844	51,790		14,001		391,635
MADELEINE VILLA INC.....	2,300					2,300
MADISON WI VA HOSPITAL.....	13,889	6,945				20,834
MAGDY EL KALLINY.....	3,045					3,045
MAHRUKH SUBHANI.....					2,454	2,454
MAJESTY HEALTH & REHAB.....	4,264					4,264
MALIBU CALIFORNIA MODEL.....	3,430					3,430
MAMDOUH BAKHOS MD.....	2,262					2,262
MANAGEMENT & NETWORK SERVICES LLC.....					3,975	3,975
MANAGEMENT AND NETWORK SERVICE.....	33,299					33,299
MANNA HEALTH & REHAB OF PICKEN.....	7,088					7,088
MANOR CARE OF HINSDALE IL LLC.....	11,304					11,304
MANOR CARE OF HOMEWOOD IL LLC.....	3,283					3,283
MANOR CARE OF OAK LAWN EAST.....	2,406					2,406
MANOR CARE OF OAK LAWN WEST LL.....	2,727					2,727
MANOR CARE OF PALOS HEIGHTS.....	7,994					7,994
MANOR CARE OF SPOKANE.....	3,977					3,977
MANOR CARE OF WESTMONT IL LLC.....	5,319					5,319
MANOR CARE OF WILMETTE IL LLC.....					3,694	3,694
MANORCARE HEALTH SERVICES.....	26,193	4,608				30,801
MANORCARE HEALTH SERVICES NORTH OLMSTED.....					4,176	4,176
MANORCARE HEALTH SERVICES TUCSON.....	5,630					5,630
MANORCARE HEALTH SERVICES-ELGI.....	3,603					3,603
MANORCARE OF LYNWOOD.....	3,445					3,445
MANORCARE OF NAPERVILLE IL LLC.....	3,818					3,818
MANORCARE OF SOUTH HOLLAND LLC.....	4,440					4,440
MANORCARE OF SPRINGFIELD MO.....	2,540					2,540
MANUEL CASTRO ARREOLA.....	3,440					3,440
MARC A BORGE MD.....			2,128			2,128
MARGARET GUTHRIE.....	2,740					2,740
MARGARET MARY COMMUNITY HOSPITAL.....	10,924					10,924
MARGARET R NETTLETON MD.....					39,740	39,740
MARICOPA HEALTH SYSTEM.....	9,617		6,419			16,035
MARIO ZUCCARELLO.....	2,758					2,758
MARK CHARIKER.....					3,580	3,580
MARK CORNETT.....	2,010					2,010
MARK CRAWFORD.....	4,470					4,470
MARK DUBIN MD LLC.....					60,801	60,801
MARK GIACOMIN.....					686,807	686,807
MARK HAMMOND.....					2,075	2,075
MARSHALL EMERGENCY SERVICES.....	2,819					2,819
MARY BLACK MEMORIAL HOSPITAL.....	39,429				43,958	83,387
MARY FOX.....	3,362					3,362
MARYHAVEN NURSING & REHAB CTR.....	5,257					5,257
MARYVIEW MEDICAL CENTER.....	6,433					6,433
MASON HEALTHCARE FACILITY.....	2,777					2,777
MASONIC HEALTH CARE CENTER.....	2,040					2,040
MATTHEW BUSAM.....	2,891					2,891
MATTHEW HUNT.....	2,464					2,464
MAURICIO VALDES.....	5,793					5,793
MAX STEUER.....	9,099					9,099
MAXIM HEALTHCARE SERVICES INC.....	6,927					6,927
MAXWELL BOAKYE.....	3,064					3,064
MAYO CLINIC JACKSONVILLE.....		2,274				2,274
MCCUNE BROOKS REGIONAL HOSPITAL.....	6,136					6,136

STATEMENT AS OF MARCH 31, 2012 OF THE Humana Health Plan, Inc.

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
MCKEE MEDICAL CENTER.....	4,638	3,712				8,350
MD ANDERSON CANCER CENTER.....	36,085					36,085
MEA ELK GROVE LLC.....					477,605	477,605
MEADOWBROOK MANOR BOLINGBROOK.....	5,636					5,636
MEADOWVIEW HEALTHCARE & REHAB.....	2,105					2,105
MEASE DUNEDIN HOSPITAL.....	3,133					3,133
MECHANICSVILLE DIALYSIS.....	4,301					4,301
MED TRANS CORP.....	4,724					4,724
MEDICAL CENTER AT BOWLING GREEN.....	2,329	4,871				7,200
MEDICAL CENTER OF AURORA.....	91,903	17,440				109,344
MEDICAL CENTER OF MCKINNEY.....	2,083					2,083
MEDICAL CENTER OF THE ROCKIES.....		25,823				25,823
MEDICAL CTR OF CENTRAL GEORGIA.....	7,403					7,403
MEDICAL DIAGNOSTIC SERVICES.....	2,309					2,309
MEDICAL EX PRESS AMBULANCE SERVICE.....	2,057					2,057
MEDICAL UNIV HOSP AUTHORITY.....	30,102					30,102
MEDIPLANE INC.....	5,467					5,467
MEMORIAL HEALTH SYSTEM.....	190,635				3,640	194,276
MEMORIAL HERMANN HOSPITAL.....	4,998					4,998
MEMORIAL HOSPITAL MIRAMAR.....	16,682					16,682
MEMORIAL HOSPITAL OF ADEL.....	4,573					4,573
MEMORIAL HOSPITAL OF TAMPA.....	9,364	9,532				18,896
MEMORIAL HOSPITAL PEMBROKE.....	10,998					10,998
MEMORIAL HOSPITAL WEST.....	8,655					8,655
MEMORIAL MEDICAL CENTER.....	10,324					10,324
MEMORIAL REGIONAL HOSPITAL.....	14,482					14,482
MENORAH MEDICAL CENTER.....	106,761	3,684			4,531	114,976
MERCY AIR.....	6,418					6,418
MERCY GILBERT MEDICAL CENTER.....	120,554					120,554
MERCY HOSPITAL & MEDICAL CTR.....	39,042	8,023				47,065
MERCY HOSPITAL A CAMPUS OF PGH.....	21,021					21,021
MERCY HOSPITAL ANDERSON.....	15,129					15,129
MERCY HOSPITAL AURORA.....	3,451					3,451
MERCY HOSPITAL CLERMONT.....	2,010					2,010
MERCY HOSPITAL FAIRFIELD.....	7,079					7,079
MERCY HOSPITAL JANESVILLE.....	9,045					9,045
MERCY HOSPITAL LEBANON.....	2,170					2,170
MERCY HOSPITAL MOUNT AIRY.....	7,332					7,332
MERCY HOSPITAL OF FOLSOM 73414.....	21,494					21,494
MERCY HOSPITAL SCOTT COUNTY.....	2,413					2,413
MERCY HOSPITAL SPRINGFIELD.....	208,967	97,816	14,784	8,372		329,938
MERCY HOSPITAL WESTERN HILLS.....	9,087					9,087
MERCY MEDICAL CENTER.....	157,648				41,864	199,512
METHODIST HOSPITAL.....	13,859	4,441				18,300
METHODIST HOSPITALS.....	4,456					4,456
METHODIST MEDICAL CENTER.....	34,728					34,728
METHODIST MEDICAL CENTER OF ILLINOIS.....	4,476			2,911		7,387
METHODIST TEXSAN HOSPITAL.....	7,168					7,168
METROSOUTH MEDICAL CENTER.....	6,500	8,406			17,595	32,501
MIAMI CHILDRENS HOSPITAL.....	5,704					5,704
MIAMI VALLEY HOSPITAL.....			8,906		7,050	15,956
MICHAEL A VIERTHALER MSN FNPC.....	2,541					2,541
MICHAEL D SAPOZINK MD.....	3,919					3,919
MICHAEL DING.....	4,736					4,736
MICHAEL EASTMAN.....	2,078					2,078
MICHAEL EPPIG.....					10,699	10,699

STATEMENT AS OF MARCH 31, 2012 OF THE Humana Health Plan, Inc.

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
MICHAEL J EISENBERG.....					3,657	3,657
MICHAEL REESE HOSP & MED CTR.....					16,404	16,404
MICHAEL ROHMILLER.....	3,144					3,144
MICHAEL Y CHANG MD.....					3,760	3,760
MICHELLE TINGLEY.....			7,817			7,817
MID AMERICA KIDNEY STONE ASSOC.....	2,404					2,404
MID AMERICA REHAB HOSPITAL.....	11,628					11,628
MIDWEST HEARING CENTER.....	2,884					2,884
MIDWEST ORTHOPEDIC SPECIALTY.....	10,391					10,391
MILES GRAIVIER.....					4,254	4,254
MILLENNIUM LABORATORIES INC.....	13,925					13,925
MILLERS MERRY MANOR.....	8,729					8,729
MILWAUKEE COUNTY MHC.....	3,090					3,090
MINERAL AREA REGIONAL MEDICAL.....	2,100					2,100
MINIMED DISTRIBUTION CORP.....	2,243					2,243
MINNEAPOLIS VAMC.....	2,353					2,353
MITCHELL MARTIN.....			3,588			3,588
MITCHELL SIMONS.....	2,810					2,810
MLADEN DJURASOVIC.....	2,426					2,426
MO HEALTHNET DIVISION.....	2,407					2,407
MOBILE INFIRMARY MEDICAL CENTER.....	16,978					16,978
MOBILE INFIRMARY MEDICAL CNTR.....	36,786					36,786
MOBILE MED CARE.....	7,993					7,993
MOHAB FOAD.....	2,112					2,112
MOHAMMED MASRI.....			3,855			3,855
MONTCLAIR NURSING.....	4,268					4,268
MONTEREY PARK NURSING CENTER.....	4,399					4,399
MORTON PLANT HOSPITAL.....	2,675					2,675
MOUNT SINAI HOSPITAL.....	50,947				2,442	53,390
MOUNT SINAI MEDICAL CENTER.....			13,969			13,969
MOUNTAIN EMPIRE CATARACT & EYE.....	2,176					2,176
MOUNTAIN HOME VAMC.....	3,282					3,282
MOUNTAIN VIEW CARE CENTER.....	3,671					3,671
MOUNTAIN VIEW HOSPITAL.....	85,935	9,196	10,985	26,122	299,052	431,289
MOUNTAIN VISTA HEALTH CENTER.....	3,225					3,225
MOUNTAIN VISTA MEDICAL CENTER.....	98,200					98,200
MSMC HOME CARE.....	2,957					2,957
MT SINAI MEDICAL GROUP.....					2,403	2,403
MUNSTER MEDICAL RESEARCH FOUNDATION.....	12,143					12,143
NANCY BUTLER.....	2,087					2,087
NANSEMOND POINTE REHAB.....	5,323					5,323
NAPERVILLE DIALYSIS CENTER.....	15,789					15,789
NAPERVILLE PSYCH VENTURE.....	9,616		3,433			13,049
NARENDER R GORUKANTI MD.....	2,585					2,585
NASIR SHAHAB MD.....	3,052					3,052
NATIONAL PARK MEDICAL CENTER.....	159,246					159,246
NATIONAL SEATING & MOBILITY.....	11,458					11,458
NEBRASKA METHODIST HOSPITAL.....	8,363	5,028				13,391
NEBRASKA SKILLED NURSING & REHAB.....	8,259	3,036				11,295
NEBRASKA SPINE HOSPITAL LLC.....	32,094					32,094
NEOMEDICA HAZEL CREST.....	25,664					25,664
NEOMEDICA EVERGREEN PARK.....	11,758	13,165				24,923
NEOMEDICA SOUTH CHICAGO.....	10,128					10,128
NEURORESTORATIVE KENTUCKY.....	4,620					4,620
NEVADA ANESTHESIA CONSULTANTS.....	4,800					4,800
NEW HAMPSHIRE SPINE.....	2,079					2,079



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CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
NEW HAVEN CARE AND REHAB CENTER.....	3,773					3,773
NEW HOPE HEALTH AND REHABILITATION.....	3,159					3,159
NEW MARK CARE CENTER.....	6,640					6,640
NEWTON MEDICAL CENTER.....	2,318					2,318
NHC HEALTHCARE ANDERSON.....	3,231					3,231
NHC HEALTHCARE BRISTOL.....	4,785					4,785
NHC HEALTHCARE GREENVILLE.....	4,123					4,123
NHC HEALTHCARE MAULDIN.....	15,363					15,363
NICHOLAS R MATARAGAS.....	7,804					7,804
NILESH D MEHTA MD.....	5,031					5,031
NIX HEALTH CARE SYSTEM.....					16,568	16,568
NORFOLK HEALTH & REHABILITATION.....	2,458					2,458
NORTH ADAMS REGIONAL HOSPITAL.....		3,205				3,205
NORTH ARKANSAS REGIONAL MEDICAL.....	17,892	2,512				20,405
NORTH AUSTIN MEDICAL CENTER.....	16,063					16,063
NORTH AVENUE DIALYSIS CENTER.....	16,596					16,596
NORTH BALDWIN INFIRMARY.....	2,446					2,446
NORTH CENTRAL BAPTIST.....	2,845					2,845
NORTH COLORADO MEDICAL CENTER.....	44,252	4,005				48,257
NORTH HILLS DIALYSIS CENTER.....	5,935					5,935
NORTH KANSAS CITY HOSPITAL.....	277,305	27,584	3,791			308,681
NORTH LOGAN MERCY HOSPITAL.....		2,094				2,094
NORTH OAKS MEDICAL CENTER LLC.....	15,037					15,037
NORTH PHOE NIX ORTH.....	2,292					2,292
NORTH SUBURBAN MEDICAL CENTER.....	14,514	9,021				23,534
NORTH VISTA HOSPITAL.....					94,392	94,392
NORTHERN COCHISE COMMUNITY HOSPITAL.....	14,588					14,588
NORTHERN COLORADO LONG TERM.....	9,257					9,257
NORTHSHORE UNIVERSITY HEALTH.....	2,548					2,548
NORTHSHORE UNIVERSITY HEALTHSYSTEM.....	207,345					207,345
NORTHSHORE UNIVERSITY HEALTHSYSTEM.....	12,099					12,099
NORTHSIDE AUDIOLOGY GROUP.....	2,965					2,965
NORTHSIDE CHEROKEE HOSPITAL INC.....	9,967					9,967
NORTHSIDE FORSYTH.....	41,398					41,398
NORTHSIDE HOSPITAL.....	153,289					153,289
NORTHWEST COMMUNITY HOSPITAL.....	88,896	12,559			12,559	114,015
NORTHWEST MEDICAL CENTER.....	124,270	24,578	8,813			157,660
NORTHWESTERN LAKE FOREST HOSPITAL.....	8,332					8,332
NORTHWESTERN MEMORIAL HOSPITAL.....	108,447				9,579	118,026
NORTON AUDUBON HOSPITAL.....	121,392					121,392
NORTON BROWNSBORO HOSPITAL.....	83,703	2,464	17,897			104,064
NORTON COMMUNITY HOSPITAL.....	19,709					19,709
NORTON HEALTHCARE PAVILION.....	145,765	9,802				155,567
NORTON HOSPITAL INC.....	2,128					2,128
NORTON HOSPITALS INC.....				3,132	33,458	36,589
NORTON SUBURBAN HOSPITAL.....	144,535	7,341				151,876
NORWEGIAN AMERICAN HOSPITAL.....	5,275					5,275
NRI LOUISVILLE.....	17,058					17,058
NW MEDICAL CENTER BENTONVILLE.....	10,338					10,338
NW MEDICAL FACULTY FOUNDATION.....	3,645	3,192				6,837
OAK PARK MEDICAL PRACTICES.....					94,501	94,501
OAKBROOK HEALTH CARE CENTER.....	2,521					2,521
OAKFIELD DRIVE EMERG PHYSICIAN.....	3,494					3,494
OAKFIELD DRIVE EMERGENCY PHYSICIAN.....	2,275					2,275
OAKLAWN RADIOLOGY IMAGING.....					27,400	27,400
OAKMONT EAST.....	4,894					4,894

STATEMENT AS OF MARCH 31, 2012 OF THE Humana Health Plan, Inc.

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
OBSTETRICS ANESTHESIA ASSOC GROUP.....	2,515					2,515
OCHSNER FOUNDATION HOSPITAL.....	6,931					6,931
OCONEE MEDICAL CENTER.....	12,217					12,217
OHIO STATE UNIV HOSPITALS.....	5,208					5,208
OHIO VALLEY MEDICAL CENTER LLC.....	2,263					2,263
OLATHE MEDICAL CENTER INC.....	43,119					43,119
OLGA S VINOKUR MD.....	2,635					2,635
OLSTEN HOME HEALTH CARE.....	3,204					3,204
ORDERIA MITCHELL.....	3,053					3,053
ORLANDO REGIONAL HEALTHCARE SYSTEM INC.....	2,239					2,239
ORO VALLEY HOSPITAL.....	3,731	29,959				33,690
ORTHO COLORADO HOSPITAL.....	3,204					3,204
ORTHOFIX INC.....	3,162					3,162
ORTHOPAEDIC HOSPITAL OF WISCONSIN.....	12,771					12,771
ORTHOPEDIC ASSOCIATES SC.....					2,419	2,419
OSF SAINT FRANCIS MEDICAL CENTER.....	33,819					33,819
OUR LADY OF BELLEFONTE HOSPITAL INC.....	5,196					5,196
OUR LADY OF PEACE.....	2,483					2,483
OUR LADY OF RESURRECTION.....	4,540					4,540
OUR LADY OF THE RESURRECTION.....	192,775	3,688				196,463
OVERLAND PARK REGIONAL MEDICAL.....	142,420	58,215			2,926	203,562
OVERLAND PARK REGIONAL MEDICAL CENTER.....	19,604					19,604
OVERLAND PARK SURGERY CENTER.....	5,700					5,700
OVIDIU BRESCAN MD.....					2,016	2,016
OWENSBORO MEDICAL HEALTH.....	13,145		2,128			15,273
OZARKS COMMUNITY HOSPITAL.....					3,813	3,813
PA PETERSON CENTER FOR HEALTH.....	5,034					5,034
PALMETTO HEALTH ALLIANCE.....	20,852					20,852
PALO VERDE MENTAL HEALTH.....	6,818					6,818
PALOS COMMUNITY HOSPITAL.....	23,846					23,846
PARADISE HOME CARE INC.....	2,297					2,297
PARADISE VALLEY HOSPITAL.....	9,788				3,123	12,911
PARHAM HEALTH CARE AND REHAB.....	10,374					10,374
PARKER ADVENTIST HOSPITAL.....	52,698	3,342				56,040
PARKRIDGE MEDICAL CENTER INC.....					4,237	4,237
PARKVIEW HEALTH CARE FACILITY.....	2,845					2,845
PARKVIEW HOSPITAL INC.....	9,230					9,230
PARKWEST MEDICAL CENTER.....	16,308	7,515			31,470	55,292
PATEWOOD MEMORIAL HOSPITAL.....	47,593					47,593
PATHOLOGY PARTNER.....					67,001	67,001
PATHOLOGY SPECIALISTS OF ARIZONA.....	2,161					2,161
PATRICIA NEAL REHAB CENTER.....	5,982					5,982
PATRICK CHO MD.....					5,660	5,660
PATRICK MCKENZIE.....	2,305					2,305
PATTIE A CLAY REGIONAL MEDICAL.....	2,408					2,408
PATTIE A CLAY REGIONAL MEDICAL CENTER.....	2,845	2,188				5,032
PAUL ARNOLD.....	2,769					2,769
PAUL B HALL REGIONAL MED CTR.....	5,351					5,351
PAUL BAEK.....			8,298			8,298
PAUL BRADY.....	3,741	4,739				8,480
PAUL COHEN.....	3,475					3,475
PEACEHEALTH SOUTHWEST MEDICAL.....	18,414					18,414
PEEUSH SINGHAL.....	6,386					6,386
PENNSYLVANIA HOSPITAL.....	11,783					11,783
PENROSE HOSPITAL.....	7,255					7,255

STATEMENT AS OF MARCH 31, 2012 OF THE Humana Health Plan, Inc.

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
PENROSE ST FRANCIS.....	55,416	2,835				58,250
PETA MINEROF DPM.....					2,101	2,101
PETER BASTA.....	2,842					2,842
PETER CHA.....	7,793					7,793
PETER DAWSON M D.....	3,973				12,104	16,077
PETER ULLRICH JR.....	2,234					2,234
PHGY LLC DBA GOLDEN YEARS.....	9,262					9,262
PHILIP BAPTISTE.....					2,740	2,740
PHILIP RAFEY.....	2,720					2,720
PHILIP THEODOSPOULOS.....	2,169					2,169
PHOEBE PUTNEY MEMORIAL HOSPITAL.....	7,696	3,680				11,377
PHOENIX BAPTIST HOSPITAL.....	45,479					45,479
PHOENIX BAPTIST HOSPITAL.....	12,124					12,124
PHOENIX CHILDRENS HOSPITAL.....	10,701					10,701
PHT JACKSON MEMORIAL HOSPITAL.....	5,952					5,952
PHYSICIANS CHOICE LABORATORY.....	3,502					3,502
PHYSICIANS SURGERY CENTER.....	3,100					3,100
PHYSIOTHERAPY ASSOCIATES INC.....	2,308					2,308
PIKEVILLE MEDICAL CENTER INC.....	5,504					5,504
PINNACLE RIDGE.....	6,899					6,899
PLATTE VALLEY MEDICAL CENTER.....	19,940					19,940
PLAZA MANOR.....	2,681					2,681
PLAZA SURGERY CENTER LP.....			3,800			3,800
PLEASANT HILL HEALTH AND REHAB.....	16,713					16,713
POCOLA NURSING CENTER.....	2,236					2,236
PORT HURON HOSPITAL.....	2,575					2,575
PORTER ADVENTIST HOSPITAL.....			7,363			7,363
PORTER ADVENTIST HOSPITAL.....	128,454	3,957				132,412
POS T VAC.....	4,775					4,775
POUDRE VALLEY HOSPITAL.....	15,638					15,638
PRAGYA GUPTA.....	2,170					2,170
PRECISE AMBULANCE COMPANY.....	3,823					3,823
PREMIER PAIN SPECIALISTS LLC.....					50,601	50,601
PREMIER SURGERY CTR OF LOUISVILLE LP.....	3,116					3,116
PREMIER SURGICAL CENTER.....	2,685					2,685
PRESBYTERIAN ST LUKES MED CTR.....	6,139	6,737				12,876
PRESBYTERIAN ST LUKES MEDICAL.....	30,089					30,089
PRINCETON BAPTIST MED CENTER.....	26,379					26,379
PRINCETON BAPTIST MEDICAL CENTER.....	6,033					6,033
PROCTOR HOSPITAL.....	13,163					13,163
PROFESSIONAL MEDICAL TRANSPORT.....	2,402					2,402
PROVENA HOME HEALTH.....	3,043					3,043
PROVENA MCAULEY MANOR.....	22,401					22,401
PROVENA MERCY MEDICAL CENTER.....	152,915	8,999			104,976	266,889
PROVENA PINEVIEW CARE CENTER.....		4,282				4,282
PROVENA REGIONAL CANCER CENTER.....	83,534					83,534
PROVENA ST ANNE CENTER.....		3,571				3,571
PROVENA ST JOSEPH HOSPITAL.....	4,299					4,299
PROVENA ST JOSEPH MEDICAL CENTER.....	3,153				5,014	8,166
PROVENA ST JOSEPH MEDICAL.....	42,064					42,064
PROVENA ST MARYS HOSPITAL.....			8,339			8,339
PROVENA ST MARYS OF KANK.....					4,780	4,780
PROVENA VILLA FRANCISCAN.....	10,976					10,976
PROVIDENCE HOSPICE AND HOMECARE.....	3,051					3,051
PROVIDENCE HOSPITAL.....	68,866	5,867				74,733
PROVIDENCE MEDICAL CENTER.....	304,336	50,566	30,563			385,465

STATEMENT AS OF MARCH 31, 2012 OF THE Humana Health Plan, Inc.

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
PROVIDENCE REGIONAL MEDICAL.....	49,214					49,214
PSG SERVICES DBA INTERIM HEALTH.....	2,495					2,495
PUEBLO SPRINGS REHABILITATION.....	2,787	9,463				12,250
QUEST DIAG NOSTICS.....	13,400					13,400
QUEST DIAGNOSTICS.....	8,056					8,056
RADIANT HILLS HEALTH ASSOC LLC.....	2,445					2,445
RADIATION ONCOLOGY LTD.....					26,800	26,800
RADIOLOGICAL CONS OF WOODSTOCK.....					174,402	174,402
RADIOLOGICAL PHYSICIANS.....					46,581	46,581
RADIOLOGY LTD.....	6,435					6,435
RANDALL K MCGIVNEY.....	3,109					3,109
RCG KDC OF THE OZARKS HOME.....	8,637					8,637
RCG MERRIONETTE PARK.....	24,988					24,988
RCG VILLA PARK.....	8,780					8,780
RECOVERY ASSOC OF THE PALM BCH.....	2,119					2,119
RECOVERY WORKS DRUG AND ALCOHOL.....	7,605					7,605
RED RIVER PAIN MANAGEMENT PLLC.....	15,460					15,460
RED ROCK BEHAVIORAL.....			7,302			7,302
REDMOND REGIONAL MEDICAL CENTER.....					2,930	2,930
REGENCY HEALTH & REHABILITATION.....		2,574				2,574
REGENCY HOSP NW ARKANSAS.....	34,998					34,998
REGENCY HOSPITAL OF CINCINNATI LLC.....	5,964					5,964
REGIONAL MEDICAL CENTER.....	4,006	5,819				9,825
REHAB & HLTH CTR OF CAPE CORAL.....	2,495					2,495
REHAB INSTITUTE OF CHICAGO.....	2,665					2,665
REHAB INSTITUTE OF W FLORIDA.....	3,243					3,243
RENAL TREATMENT CENTERS ILLINOIS.....	4,678					4,678
RESEARCH MEDICAL CENTER.....	271,335	64,525			10,093	345,953
RESEARCH PSYCHIATRIC CENTER.....	12,381			7,822		20,203
RESURRECTION HEALTHCARE CORP.....	9,776					9,776
RESURRECTION HOME HEALTH.....	12,787					12,787
RESURRECTION HOSPITAL.....					57,601	57,601
RESURRECTION MED CENTER REHAB.....	2,743					2,743
RESURRECTION MEDICAL CENTER.....	138,331			2,152	5,520	146,004
RESURRECTION NURSING & REHAB.....					2,862	2,862
RICHARD BEATY.....					23,000	23,000
RICHARD HARRISON.....	2,943					2,943
RICHARD WILLIAMS.....	3,542					3,542
RIDGE BEHAVIORAL HEALTH SYSTEM.....	3,036					3,036
RIGHTSOURC E.....	3,063					3,063
RIVER CENTER DIALYSIS.....	3,957					3,957
RIVER OAKS HOSPITAL.....	3,101	3,782				6,883
RIVERSIDE BEHAVIORAL HLTH CTR.....	3,055					3,055
RIVERSIDE MEDICAL CENTER.....	7,723					7,723
RIVERVIEW HEALTH INSTITUTE.....				38,006		38,006
RIVERVIEW HOSPITAL.....	24,369					24,369
RIVERVIEW REGIONAL MEDICAL CTR.....	21,235					21,235
RM ANESTHESIA LLC.....	3,146					3,146
RML HEALTH PROVIDERS LP.....	10,815			28,312		39,127
ROBERT BOHINSKI.....	2,518					2,518
ROBERT BRUCE.....	2,580					2,580
ROBERT BUTH.....	6,170					6,170
ROBERT D OWEN MD.....	2,549					2,549
ROBERT E FISHER MD.....	2,965					2,965
ROBERT JOTTE.....	3,648					3,648
ROBERT KLICKOVICH.....		3,911				3,911

STATEMENT AS OF MARCH 31, 2012 OF THE Humana Health Plan, Inc.

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
ROBERT OSTERDAY.....	2,833					2,833
ROCK CANYON NURSING AND REHABILITATION.....		3,747				3,747
ROCKCASTLE CO HOSPITAL INC.....	2,148					2,148
ROCKDALE MEDICAL CENTER.....	4,170					4,170
ROCKFORD CENTER.....		3,777				3,777
ROCKFORD HEALTH SYSTEMS.....	2,583					2,583
ROCKFORD MEMORIAL HOSPITAL.....	48,779	2,939				51,718
ROCKTON COMMUNITY HEALTH CTR.....					61,630	61,630
ROCKY MOUNTAIN HOLDINGS LLC.....	40,186					40,186
ROGER COLBERT.....	2,591					2,591
ROGERS MEMORIAL HOSPITAL.....	2,249					2,249
ROKEYA BEGUM AKHTAR M D.....					491,205	491,205
ROLAND M TIO MD.....	2,597				10,440	13,037
ROLAND WESLEY MIYADA MD.....					4,092	4,092
RONALD POTKUL MD.....	2,248					2,248
ROSE DELIMA HOSPITAL.....					580,904	580,904
ROSE MEDICAL CENTER.....	105,024	64,372				169,396
ROSEMARY S CARROLL MD.....		2,343				2,343
ROSEWOOD CARE CENTER OF JOLIET.....	4,722	5,946				10,668
ROSEWOOD CARE CENTER OF ROCKFORD.....	3,705					3,705
ROSEWOOD HEALTH AND REHAB CENTER.....	8,284					8,284
ROYA FAMILY MEDICAL CENTER.....					175,002	175,002
ROYAL TERRACE NURSING AND REHAB.....	2,010					2,010
ROYAL TERRACE NURSING.....	4,453					4,453
RUDOLPH ALTERGOTT.....					2,041	2,041
RUSH UNIVERSITY MEDICAL CENTER.....	15,484					15,484
RUSH UNIVERSITY MEDICAL CTR.....	20,647					20,647
RUSSELL R REID MD.....	3,186					3,186
S BALDWIN REGIONAL MEDICAL CTR.....	20,407					20,407
SACRED HEART HOME HEALTH CARE.....	3,080					3,080
SACRED HEART HOSPITAL OF PENSACOLA.....	2,363					2,363
SACRED HEART HOSPITAL.....	16,742					16,742
SACRED HEART MEDICAL CENTER.....	27,557					27,557
SACRED HEART MEDICAL CENTER.....	5,942					5,942
SACRED HEART VILLAGE.....	5,867					5,867
SAI RAMASASTRY MD.....	3,324					3,324
SAINT ALPHONSUS REGIONAL MEDICAL.....	78,519					78,519
SAINT ANTHONY MEDICAL CENTER.....	9,677	6,054				15,731
SAINT FRANCIS MEDICAL CENTER.....	39,748					39,748
SAINT JOSEPH BEREA.....	3,503					3,503
SAINT JOSEPH EAST HOSPITAL.....	44,615					44,615
SAINT JOSEPH HEALTH SYSTEM.....	23,915	7,538	3,931			35,384
SAINT JOSEPH HOSPITAL.....	58,467	9,613				68,079
SAINT JOSEPH LONDON.....	9,956					9,956
SAINT MARY OF NAZARETH MEDICAL.....			4,202			4,202
SAINTS MARY & ELIZABETH MEDICAL.....	295,556			11,731	25,889	333,176
SAINTS MARY AND ELIZABETH HOSPITAL.....	45,493	3,671				49,164
SAINTS MARY AND ELIZABETH.....	9,951					9,951
SAMER HASAN.....	4,778					4,778
SAMUEL M YUNEZ MD.....					32,400	32,400
SAMUEL MICKELSON.....	4,888					4,888
SAN JACINTO METHODIST HOSPITAL.....	3,219	2,696				5,915
SANDFORD SCHOCKET.....			2,956			2,956
SANDRA BOUZAGLOU.....		2,410				2,410
SANJAY GHOSH.....					6,040	6,040
SARASOTA MEMORIAL HOSPITAL.....	13,560	11,568				25,128

STATEMENT AS OF MARCH 31, 2012 OF THE Humana Health Plan, Inc.

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Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
SAROJ DUBAL.....	2,187					2,187
SCOTT AND WHITE MEMORIAL HOSPITAL.....	4,720					4,720
SCOTTSDALE DIALYSIS CENTER.....				11,857	7,257	19,114
SCOTTSDALE HEALTHCARE OSBORN.....	5,632					5,632
SCTTSDLE HLTH OSB.....	115,020	12,681	8,508			136,210
SCTTSDLE HLTH SHEA.....	71,153					71,153
SCTTSDLE HLTH TPK.....	20,754					20,754
SEBOUH A GUEYIKIAN MD.....	2,932					2,932
SELECT SPECIALTY HOSPITAL.....	26,607					26,607
SELECT SPECIALTY HOSPITAL OMAHA.....	9,087					9,087
SENTARA CAREPLEX HOSPITAL.....	37,701					37,701
SENTARA LEIGH HOSPITAL.....	2,855					2,855
SENTARA NORFOLK GENERAL HOSPITAL.....	109,745					109,745
SENTARA NORFOLK GENERAL HOSPITAL.....	31,317					31,317
SENTARA NURSING CENTER.....	2,033					2,033
SENTARA OBICI HOSPITAL.....	52,733					52,733
SERGIO VIROSLAV.....	3,026					3,026
SETON MEDICAL CENTER AUSTIN.....		7,716	6,763	34,468		48,947
SHABBONA HEALTHCARE CENTER.....	2,714	2,242				4,956
SHANDS UF.....	20,254					20,254
SHANE A ANDREW DO.....	4,382					4,382
SHARON LANE HEALTH SERVICES.....	2,324					2,324
SHAWNEE GARDENS HEALTHCARE.....	12,031					12,031
SHAWNEE MISSION MEDICAL CENTER.....	5,217					5,217
SHAWNEE MISSION MEDICAL CTR.....	35,732	3,605				39,336
SHEKAR KURPAD.....	11,690					11,690
SHELBY BAPTIST MEDICAL CENTER.....	181,018					181,018
SHELBY RIDGE NURSING HOME.....	2,212					2,212
SHERMAN HOSPITAL.....	48,362				3,758	52,120
SHILOH NURSING AND REHAB LLC.....	2,342					2,342
SHITAL PARIKH.....	3,711					3,711
SIERRA VISTA HEALTH CARE CNTR.....	4,258					4,258
SIERRA VISTA REGIONAL HEALTH.....	8,336					8,336
SILVER CROSS HOSPITAL.....	8,683				5,846	14,530
SIRONA INFUSION LLC.....	3,306					3,306
SKAGGS REGIONAL MEDICAL CENTER.....	9,579					9,579
SKY RIDGE MEDICAL CENTER.....	77,432	13,820				91,252
SKYLINE MEDICAL CENTER.....		2,923				2,923
SKYRIDGE MEDICAL CENTER.....	5,470	2,136				7,605
SLMV HOME HEALTH.....	2,074					2,074
SMYTH COUNTY COMMUNITY HOSPITAL.....	16,772					16,772
SOLARI HOSPICE CARE LLC.....					4,027	4,027
SONORA BEHAVIORAL HEALTH.....			4,905			4,905
SONORA QUE ST LABORATORIES.....	6,010					6,010
SONORA QUEST LABORATORIES LLC.....	4,053					4,053
SOUTH BAY HOSPITAL.....	5,657					5,657
SOUTH DENVER ANESTHESIOLOGISTS.....	2,477					2,477
SOUTH FLORIDA BAPTIST HOSPITAL.....	28,690					28,690
SOUTH HOLLAND RENAL CENTER.....	22,394					22,394
SOUTH MIAMI HOSPITAL INC.....	5,271					5,271
SOUTH RIDGE DIALYSIS.....	12,337					12,337
SOUTH SHORE HOSP.....	8,135		7,998			16,133
SOUTH SIDE DIALYSIS CENTER.....	9,072	10,615				19,687
SOUTH SUBURBAN KIDNEY GROUP.....	8,743					8,743
SOUTH TEXAS HEALTH SYSTEM.....	3,315					3,315
SOUTHEASTERN EMERGENCY PHYSICIANS INC.....	10,910					10,910

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Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
SOUTHERN HILLS HOSPITAL					270,295	270,295
SOUTHERN HILLS HOSPITAL	5,571					5,571
SOUTHPOINT NURSING & REHAB CTR	2,877					2,877
SOUTHVIEW HOSPITAL	4,109					4,109
SOUTHWEST DIAGNOSTIC IMAGING	3,972					3,972
SOUTHWOOD CARE CENTER LP					3,168	3,168
SPARKS REGIONAL MEDICAL CENTER	61,192	109,390			35,355	205,938
SPARTANBURG REGIONAL MED CTR	10,420					10,420
SPECIALTY HEALTHCARE & REHAB	2,968					2,968
SPECIALTY HOSPITAL OF MIDAMERICA	32,180					32,180
SPECTRUM HOME HEALTH AGENCY	4,591					4,591
SPRING HILL REGIONAL HOSPITAL	27,127					27,127
SPRING VALLEY HOSPITAL MEDICAL		58,356	38,327	7,304	685,761	789,747
SPRING VIEW HOSPITAL	3,938					3,938
SPRINGFIELD OB/GYN GROUP LTD					2,389	2,389
SPRINGFIELD REHAB & HEALTHCARE	2,734					2,734
SPRINGHILL MEMORIAL HOSPITAL	23,518					23,518
SPRINGWOODS BEHAVIORAL HEALTH			5,405			5,405
SSC GREELEY CENTENNIAL OPERATION	4,319					4,319
SSC MONTROSE BAY	12,848					12,848
ST JOHN HOSPITAL	3,638					3,638
ST AGNES HOSPITAL	5,895					5,895
ST ALEXIUS HOSPITAL	4,564					4,564
ST ALEXIUS MEDICAL CENTER	49,703	19,763	7,241		8,420	85,127
ST ALPHONSUS NAMPA	14,241					14,241
ST ANTHONY EMERGENCY SVCS PHYSICIAN					117,001	117,001
ST ANTHONY HOSPITAL	88,159	7,601				95,760
ST ANTHONY MEDICAL CENTER	51,284					51,284
ST ANTHONY NORTH HOSPITAL	21,369					21,369
ST ANTHONYS HOSPITAL	15,343					15,343
ST BENEDICT NURSING & REHAB					2,496	2,496
ST BERNARD HOSPITAL	22,879					22,879
ST CATHERINE HEALTHCARE	7,617					7,617
ST CHARLES MEDICAL CENTER	4,186					4,186
ST CLAIRE MEDICAL CENTER					2,862	2,862
ST CLARE HOSPITAL	2,287					2,287
ST DAVIDS HOSPITAL	2,649					2,649
ST DOMINIC JACKSON MEMORIAL HOSPITAL	10,810					10,810
ST EDWARD MERCY MEDICAL CENTER	48,045	71,986				120,031
ST ELIZABETH HEALTHCARE	345,541	38,700			9,231	393,473
ST ELIZABETH HOSPITAL BELLEVILLE	4,828					4,828
ST FRANCIS EASTSIDE	14,508					14,508
ST FRANCIS HOSP OF EVANSTON	108,214	8,481			21,546	138,241
ST FRANCIS HOSPITAL	32,383					32,383
ST FRANCIS HOSPITAL BARTLETT	2,748					2,748
ST FRANCIS HOSPITAL INC	4,053					4,053
ST FRANCIS MEDICAL CENTER	28,249					28,249
ST JOHN HOSPITAL	6,819					6,819
ST JOHN MACOMB HOSPITAL	3,374					3,374
ST JOHN MEDICAL CENTER	90,753					90,753
ST JOHNS HOSPITAL	7,660					7,660
ST JOHNS MERCY MEDICAL CENTER		4,417				4,417
ST JOSEPH HOSPITAL	49,592		2,310	7,871	2,755	62,528
ST JOSEPH HOSPITAL OF ORANGE					24,946	24,946
ST JOSEPH MEDICAL CENTER	14,442					14,442

STATEMENT AS OF MARCH 31, 2012 OF THE Humana Health Plan, Inc.

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
ST JOSEPH MERCY HOSPITAL.....	9,017					9,017
ST JOSEPH MOUNT STERLING.....	2,775	2,755				5,530
ST JOSEPHS COMMUNITY HOSP OF WEST BEND.....	5,521					5,521
ST JOSEPHS HOSP AND MED CTR.....	48,873					48,873
ST JOSEPHS HOSPITAL.....	69,364				4,280	73,645
ST JOSEPHS HOSPITAL INC.....	77,400					77,400
ST JOSEPHS MEDICAL CENTER.....	15,551					15,551
ST JOSEPHS MERCY HEALTH CENTER.....	2,322					2,322
ST JOSEPHS WOMENS HOSPITAL.....	3,442					3,442
ST LOUIS UNIVERSITY HOSPITAL.....		8,143				8,143
ST LUKES BAPTIST HOSPITAL.....	26,291					26,291
ST LUKES BEHAVIORAL HOSPITAL.....	27,489					27,489
ST LUKES EAST HOSPITAL.....	52,789	10,057				62,846
ST LUKES HOSPITAL OF KANSAS.....	26,068					26,068
ST LUKES MAGIC VALLEY REGIONAL.....	41,734	3,243				44,977
ST LUKES MEDICAL CENTER.....	5,771					5,771
ST LUKES NORTHLAND HOSPITAL.....	8,899					8,899
ST LUKES REGIONAL MEDICAL CENTER.....	81,339	8,896				90,235
ST MARY MEDICAL CENTER.....	2,126					2,126
ST MARY'S HEALTH CENTER.....	2,166					2,166
ST MARYS HOSPITAL.....	36,639					36,639
ST MARYS MEDICAL CENTER.....	124,228	24,475				148,703
ST MATTHEW LUTHERAN HOME.....			2,260			2,260
ST PETERSBURG GENERAL HOSPITAL.....	48,374					48,374
ST ROSE DOMINICAN HOSP SIENA CAMPUS.....	2,741					2,741
ST ROSE DOMINICAN HOSPITAL.....		10,540			289,039	299,579
ST ROSE DOMINICAN SIENA HOSPITAL.....					811,873	811,873
ST TAMMANY PARISH HOSPITAL.....	12,486					12,486
ST THERESA HEALTHCARE AND REHAB.....	5,423					5,423
ST THOMAS HOSPITAL.....	37,513					37,513
ST THOMAS MORE HOSPITAL.....	10,504					10,504
ST VINCENT HEALTH SYSTEM.....		78,748				78,748
ST VINCENT HOSPITAL.....	23,797	9,393				33,190
ST VINCENT HOSPITAL AND HEALTH.....	2,337				5,233	7,570
ST VINCENT HOSPITAL.....	64,135					64,135
ST VINCENT MEDICAL CTR NORTH.....	12,257					12,257
ST VINCENT RENAL DIALYSIS CENTER.....	2,574					2,574
ST VINCENTS EAST REHABILITAION.....	10,877	4,329				15,206
ST. MICHAEL'S CENTER FOR SPECIAL.....		19,032				19,032
STACEY FOLK.....	2,654					2,654
STEPHEN L CURTIN MD.....	2,623					2,623
STEPHEN ROBBINS.....	11,683					11,683
STEPPING STONE CENTER FOR RECOVERY.....	9,818					9,818
STEPPING STONE CENTER FOR RECOVERY.....	8,878					8,878
STEVEN CASEY.....	2,165	4,176				6,341
STEVEN WRAY.....			4,730			4,730
SUJITH R KALMADI MD.....	3,472					3,472
SUMMERLIN HOSPITAL MED CTR LLC.....					913,311	913,311
SUMMERLIN HOSPITAL MEDICAL CENTER.....					165,264	165,264
SUMMIT ANESTHESIA CONSULTANTS.....					3,876	3,876
SUMMIT MEDICAL CENTER.....	13,185					13,185
SUMMIT SURGICAL CENTER.....	11,694					11,694
SUMMITSURG PROCEDURE CENTER.....		4,580				4,580
SUN CITY HEALTH & REHAB CENTER.....	6,165					6,165
SUN TERRACE HEALTH CARE.....	2,488					2,488
SUNCOAST SURGICAL ASSOCIATES.....	4,350					4,350



STATEMENT AS OF MARCH 31, 2012 OF THE Humana Health Plan, Inc.

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
SUNNY RIDGE REHABILITATION.....	2,328					2,328
SUNRISE HOSPITAL AND MEDICAL.....					739,916	739,916
SUNRISE HOSPITAL AND MEDICAL CENTER.....	25,995	5,263	14,418	26,535	132,975	205,186
SUNRISE HOSPITAL AND MEDICAL CENTER.....					45,786	45,786
SUNSHINE HOME HEALTHCARE INC.....	8,201					8,201
SUPERIOR A IR GROUND AMB SERVICE.....	6,108					6,108
SUREVISION EYE CENTERS LLC.....					49,600	49,600
SURGECENTER OF LOUISVILLE.....	2,972					2,972
SUSAN HIBBS.....	3,137					3,137
SUTTER COAST HOSPITAL.....					12,742	12,742
SW AMBULANCE OF TUCSON INC.....	2,899					2,899
SWEDISH CHERRY HILL.....	69,544					69,544
SWEDISH COVENANT HOSPITAL.....	34,597	11,956	11,149	14,313	61,354	133,369
SWEDISH EDMONDS.....	41,832					41,832
SWEDISH EMERGENCY ASSOC PC.....					65,001	65,001
SWEDISH MEDICAL CENTER.....	272,116					272,116
T H C LAS VEGAS.....					77,783	77,783
TACOMA GENERAL ALLENMORE.....	56,100	14,677				70,777
TAJ MEMORIAL HEALTH CENTER.....	7,221		5,627		2,255	15,103
TAMPA BAY EMERGENCY PHYSICIANS.....	2,010					2,010
TAMPA BAY ORTHOPAEDIC SPCLALISTS.....	6,390					6,390
TAMPA BAY SURGERY CENTER.....	2,261					2,261
TAMPA GENERAL HOSPITAL.....	33,760					33,760
TAMPA VAMC.....	11,597					11,597
TAYLOR REGIONAL HOSPITAL.....	10,976					10,976
TECHE REGIONAL MEDICAL CENTER.....	20,708					20,708
TENNOVA BEHAVIORAL SERVICES.....	8,283					8,283
TENNOVA HEALTHCARE.....	48,965	6,253	19,506			74,724
TENNOVA HEALTHCARE-JEFFERSON.....	3,827					3,827
TENNOVA HEALTHCARE-LAFOLLETTE.....	2,041					2,041
TERENCE TSUE.....	5,578					5,578
TEXAS HEALTH HARRIS METHODIST.....		7,793				7,793
TEXAS HEALTH PRESBYTERIAN.....	21,958					21,958
THC CHICAGO.....	21,480					21,480
THE BROOK HOSPITAL DUPONT.....	8,777	2,314			2,258	13,349
THE BROOK HOSPITAL KMI.....	12,043	2,842	6,842			21,727
THE CAROLINA CENTER.....	15,600					15,600
THE CLAREMONT OF HANOVER.....	4,108					4,108
THE COTTAGES AT BRUSHY CREEK.....	51,116					51,116
THE EYE PA INC.....			4,522			4,522
THE HEART HOSPITAL AT DEACONES.....	9,243					9,243
THE MANOR AT ELFINDALE.....	5,512					5,512
THE MIDWEST CENTER FOR YOUTH.....	12,012					12,012
THE NEBRASKA MEDICAL CENTER.....	10,875	3,350				14,225
THE RANCH.....				4,780		4,780
THE REGENTS OF THE UNIV OF CALIFIORNIA.....					23,327	23,327
THE REHABILITATION CENTER.....	4,217					4,217
THE SWEET LIFE AT ROSEHILL.....	11,873					11,873
THE UNIVERSITY OF ARIZONA MEDICAL.....	7,673	4,991				12,664
THE VIRGINIA HEALTH & REHABILITATION.....	2,550					2,550
THOMAS F GLEASON MD.....	2,559					2,559
THOMAS HOME HEALTH.....	2,157					2,157
THOMAS HOSPITAL.....	25,122					25,122
THOMAS PITTMAN.....			2,243			2,243
THOMAS SAUL.....	3,087					3,087
THOMAS STAUSS.....	4,231					4,231

STATEMENT AS OF MARCH 31, 2012 OF THE Humana Health Plan, Inc.

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
THOREK HOSPITAL & MEDICAL CTR.....	4,533					4,533
THREE RIVERS MEDICAL CENTER.....	2,734					2,734
TIAN XIA DO.....					403,404	403,404
TILLERS NURSING & REHAB CENTER.....	11,218					11,218
TIMBERLAKE CARE CENTER.....	4,548					4,548
TIMBERLINE KNOLLS LLC.....	2,786					2,786
TIMOTHY BROWN.....	2,630					2,630
TIMOTHY KREMCHEK.....	3,543					3,543
TIMOTHY NOVAK.....	2,178					2,178
TIMPANOGOS REGIONAL HOSPITAL.....	23,010					23,010
TISA REVELS.....	2,743					2,743
TODD MESSICK.....	2,519					2,519
TORREY PINES CARE CENTER.....			15,435	7,867	27,785	51,087
TORY L MCJUNKIN MD.....	23,055					23,055
TOTAL MEDI CAL MGMT.....	2,535					2,535
TOURE A KNIGHTON MD.....	4,856					4,856
TOWN & COUNTRY HOSPITAL.....	5,900					5,900
TOWN AND COUNTRY HOSPITAL.....	2,333					2,333
TRANS HEALTH MANAGEMENT.....	9,876	4,520	2,602		2,276	19,274
TRANSITIONAL HOSP CORP.....					22,848	22,848
TRC LOWRY DIALYSIS CENTER.....	5,098					5,098
TRINITY HOSPITAL OF AUGUSTA.....	3,332					3,332
TRINITY MEDICAL CENTER.....	3,548					3,548
TRINITY NURSING AND REHAB CENTER.....	6,404	3,907				10,311
TRUMAN MED CTR HOSP HILL.....	21,417	17,470				38,887
TRUMAN MEDICAL CENTER LAKEWOOD.....	6,716					6,716
TUCSON MEDICAL CENTER.....	55,187	13,849				69,036
TUCSON SURGERY CENTER.....	3,565					3,565
TULANE UNIVERSITY HOSPITAL AND CLINIC.....	5,131					5,131
TUN JIE MD MS.....	2,030					2,030
TX MEDICAID AND HC PARTNER.....	34,962					34,962
TYSON SCHWAB SHORT AND WEISS PSC.....	3,838					3,838
U OF L HOSPITAL AND JAMES.....	17,353					17,353
UAMS HOSPITAL.....	36,536					36,536
UCLA MEDICAL CENTER.....					71,201	71,201
UF JAX PHYS INC PCP.....	2,162					2,162
UIC MEDICI NE.....	11,791					11,791
UK HEALTHCARE HOSPITAL.....	79,568	10,029			18,348	107,946
UNITED MED ICA.....	2,159					2,159
UNIV OF MIAMI HOSPITAL AND CLINICS.....	2,031					2,031
UNIV OF TENNESSEE MEDICAL CENTER.....	40,256	6,394		13,163		59,812
UNIVERSAL ORAL FLUID LAB OF PA LLC.....	5,440					5,440
UNIVERSITY COMMUNITY HOSPITAL.....	24,486	13,709	12,866			51,061
UNIVERSITY HOSPITAL.....	137,153	58,193	5,728			201,074
UNIVERSITY HOSPITALS CLEVELAND.....	2,646		51,052			53,697
UNIVERSITY MEDICAL CENTER.....	133,637	181,671	7,983	5,678	1,040,514	1,369,483
UNIVERSITY OF CHICAGO MED CTR.....	139,841	11,593				151,434
UNIVERSITY OF CHICAGO MEDICAL CENTER.....	18,138					18,138
UNIVERSITY OF COLORADO HOSPITAL.....	72,754					72,754
UNIVERSITY OF COLORADO HOSPITAL.....	5,005					5,005
UNIVERSITY OF ILLINOIS MED CTR.....	93,571	5,237			5,286	104,094
UNIVERSITY OF KANSAS HOSPITAL.....	151,409				3,870	155,279
UNIVERSITY OF KANSAS HOSPITAL AUTHORITY.....	88,570	8,920				97,490
UNIVERSITY OF LOUISVILLE HOSPITAL.....	144,782	16,718	65,218			226,719
UNIVERSITY OF MIAMI HOSPITAL.....	47,318					47,318
UNIVERSITY OF MINNESOTA MEDICAL.....		12,084				12,084

STATEMENT AS OF MARCH 31, 2012 OF THE Humana Health Plan, Inc.

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
UNIVERSITY OF MISSOURI HEALTH.....	4,427					4,427
UNM HEALTH SCIENCES CENTER.....	41,981	4,607				46,588
UNVERIFIABLE FACILITY.....	3,151					3,151
UPMC PASSAVANT.....	9,836					9,836
UROLOGICAL SERVICES LTD.....					8,488	8,488
USA MEDICAL CENTER.....	3,204					3,204
UT SOUTHWESTERN ST PAUL HOSPITAL.....		13,060				13,060
UW HOSPITAL.....	14,375	9,797				24,173
VALLEY GENERAL HOSPITAL.....	11,958					11,958
VALLEY HOSPITAL.....	33,740					33,740
VALLEY HOSPITAL MEDICAL CENTER.....	211,924	390,447		17,198	824,749	1,444,318
VALLEY MANOR & REHABILITATION.....	3,496					3,496
VALLEY VIEW MEDICAL CTR.....	4,558					4,558
VALLEY VIEW RETIREMENT COMMUNITY.....	4,404					4,404
VAN MATRE HEALTHSOUTH REHAB.....	23,983					23,983
VANDERBILT CHILDRENS HOSPITAL.....	22,979				2,676	25,654
VANDERBILT UNIVERSITY MEDICAL CENTER.....	19,097			10,534		29,632
VANGUARD HEALTH SYSTEM.....	61,221				2,417	63,638
VCU HEALTH SYSTEM.....	87,815					87,815
VEN ABIERA ADUANA MD.....					46,800	46,800
VERDE VALLEY MEDICAL CENTER.....	61,732					61,732
VHS ACQUISITION SUBSIDIARY #3.....				7,838		7,838
VHS WESTLAKE HOSPITAL INC.....	4,404					4,404
VIA CHRISTI/ST FRANCIS CAMPUS.....	29,090					29,090
VICTOR M ROMANO MD.....	4,158					4,158
VILLA SAINT JOSEPH.....	4,224					4,224
VILLAGES OF JACKSON CREEK.....	20,117	6,694				26,811
VINCENT T PENG MD.....					103,801	103,801
VISITING NURSE ASSOCIATION.....	3,003					3,003
VISTA HEALTH.....	5,830					5,830
VISTA HILLS MEDICAL CENTER.....					12,225	12,225
VISTA MEDICAL CENTER EAST.....	105,547					105,547
VISTA MEDICAL CENTER WEST.....	6,231				6,231	12,461
VNA NAZARETH HOME CARE.....	16,059					16,059
W JOHN KITZMILLER.....	2,110					2,110
WALGREENS INFUSION SERVICES.....	25,058					25,058
WALGREENS RESPIRATORY SERVICES.....	2,062					2,062
WALNUT GROVE MANAGEMENT LLC.....	20,787					20,787
WARREN BARR NURSING PAVILION.....	4,463					4,463
WASHINGTON REG MED CENTER.....	117,753	12,985				130,737
WASHINGTON REGIONAL MEDICAL CENTER.....	7,974					7,974
WATERSHED TREATMENT CENTER.....			2,506			2,506
WAUCONDA HEALTHCARE REHAB CTR.....	3,261					3,261
WAUKEGAN RENAL CENTER.....	5,513					5,513
WAUKESHA MEMORIAL HOSPITAL.....	11,673	2,081			2,758	16,513
WAUSAU DIALYSIS.....	7,816					7,816
WAYNE LEE MD.....		11,200				11,200
WEBB CITY HEALTH & REHAB.....	3,004					3,004
WELLSTAR COBB HOSPITAL INC.....	23,497					23,497
WELLSTAR DOUGLAS HOSPITAL.....	21,660					21,660
WESLEY MEDICAL CENTER.....	28,482					28,482
WESLEY Y YAPOR.....	3,708					3,708
WEST CHESTER MEDICAL.....	38,881				6,908	45,789
WEST JEFFERSON MEDICAL CENTER.....	6,125					6,125
WEST OAKS HOSPITAL.....		3,030				3,030
WEST SUBURBAN HOSP DIALYSIS.....	29,402					29,402

STATEMENT AS OF MARCH 31, 2012 OF THE Humana Health Plan, Inc.

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
WEST SUBURBAN MEDICAL CENTER.....	109,391	15,638			12,476	137,505
WEST VALLEY HOSPITAL MEDICAL CENTER.....	25,673					25,673
WEST VALLEY HOSPITAL MEDICAL CENTER.....			7,159			7,159
WEST VALLEY MEDICAL CENTER INC.....	9,332					9,332
WESTERN ARIZONA REGIONAL MEDICAL.....	13,105					13,105
WESTERN BAPTIST HOSPITAL.....	65,953		2,110			68,063
WESTERN HILLS DIALYSIS.....	11,123					11,123
WESTERN MARYLAND REGIONAL MEDICAL.....	8,084					8,084
WESTLAKE HOSPITAL.....	8,806	4,117	2,090		12,042	27,055
WESTLAKE MEDICAL PRACTICES.....					131,401	131,401
WESTMORELAND REGIONAL HOSPITAL.....	9,144					9,144
WESTRIDGE GARDENS NURSING.....	9,936	8,339				18,275
WHEATON FRANCISCAN INC.....	19,877					19,877
WHITE OAK HOME TRAINING.....	22,038					22,038
WHITE OAK NURSING & REHABILITATION.....	3,771					3,771
WHITESBURG GARDENS HEALTH CARE.....	9,213					9,213
WILLARD CAMPBELL.....	11,751					11,751
WILLARD CARE CENTER.....	7,562					7,562
WILLIAM A JOHNSON MD.....					407,904	407,904
WILLIAM APPELBAUM MD.....					33,200	33,200
WILLIAM CAIN.....	3,929					3,929
WILLIAM CAMP.....	3,457					3,457
WILLIAM D CAMP MD.....	2,523					2,523
WILLIAM DANNEMAN.....	2,489					2,489
WILLIAM PENNINGTON.....	2,509					2,509
WILLIAM SNYDER.....	2,573				5,065	7,637
WILLIAM TOBLER.....	2,692					2,692
WINDSOR HOUSE.....	4,313					4,313
WINDSOR PARK NURSING AND LIVING.....		2,840				2,840
WINTON ROAD DIALYSIS.....	12,312					12,312
WOODBIDGE REHABILITATION & HEALTH.....	2,829					2,829
WOODLAWN HOME PROGRAM.....	2,896					2,896
WOODS MEMORIAL HOSPITAL.....	2,810					2,810
WOOSTER AMBULATORY SURGERY CENTER.....		2,204				2,204
YAVAPAI REGIONAL MEDICAL CENTE.....	3,010					3,010
YEH CHUNEW OO HU VICTOR.....	3,985					3,985
YUMA REGIONAL MEDICAL CENTER.....	14,906					14,906
ZOLL LIFECOR CORP.....	2,560					2,560
.....		0				0
.....						0
.....						0
0199999 Individually listed claims unpaid.....	28,162,850	4,033,991	674,145	418,982	15,886,667	49,176,636
0299999 Aggregate accounts not individually listed-uncovered.....	830,792	118,306	21,761	12,633	477,120	1,460,612
0399999 Aggregate accounts not individually listed-covered.....	2,972,412	399,707	141,365	54,469	1,994,157	5,562,110
0499999 Subtotals.....	31,966,054	4,552,004	837,271	486,084	18,357,944	56,199,358
0599999 Unreported claims and other claim reserves.....	XXX	XXX	XXX	XXX	XXX	185,323,385
0699999 Total amounts withheld.....	XXX	XXX	XXX	XXX	XXX	
0799999 Total claims unpaid.....	XXX	XXX	XXX	XXX	XXX	241,522,743
0899999 Accrued medical incentive pool and bonus amounts.....	XXX	XXX	XXX	XXX	XXX	1,311,658

UNDERWRITING AND INVESTMENT EXHIBIT  
ANALYSIS OF CLAIMS UNPAID-PRIOR YEAR-NET OF REINSURANCE

Line of Business	Claims Paid Year to Date		Liability End of Current Quarter		5  Claims Incurred in Prior Years (Columns 1 + 3)	6  Estimated Claim Reserve and Claim Liability Dec. 31 of Prior Year
	1  On Claims Incurred Prior to January 1 of Current Year	2  On Claims Incurred During the Year	3  On Claims Unpaid Dec. 31 of Prior Year	4  On Claims Incurred During the Year		
1. Comprehensive (hospital and medical) .....	44,056,411	90,680,475	7,458,388	50,131,641	51,514,799	59,331,929
2. Medicare Supplement .....					0	0
3. Dental Only .....	86,374	537,807	34,659	140,912	121,033	102,018
4. Vision Only .....		101,198			0	0
5. Federal Employees Health Benefits Plan .....	6,973,489	23,824,854	3,841,804	6,729,252	10,815,293	10,288,432
6. Title XVIII - Medicare .....	94,678,254	325,835,228	16,838,263	156,571,824	111,516,517	115,570,879
7. Title XIX - Medicaid .....					0	0
8. Other health .....		0		0	0	0
9. Health subtotal (Lines 1 to 8).....	145,794,528	440,979,562	28,173,114	213,573,629	173,967,642	185,293,258
10. Health care receivables (a) .....		10,717,183			0	0
11. Other non-health .....					0	0
12. Medical incentive pools and bonus amounts .....	0	11,261		1,311,658	0	1,196,921
13. Totals (Lines 9-10+11+12)	145,794,528	430,273,640	28,173,114	214,885,287	173,967,642	186,490,179

(a) Excludes \$ 9,894 loans or advances to providers not yet expensed.

STATEMENT AS OF MARCH 31, 2012 OF THE HUMANA HEALTH PLAN, INC.

NOTES TO THE FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies

A. Accounting Practices

The financial statements of the Company are presented on the basis of accounting practices prescribed or permitted by the Kentucky Department of Insurance.

The Kentucky Department of Insurance recognizes only statutory accounting practices prescribed or permitted by the state of Kentucky for determining and reporting the financial condition and results of operations of an insurance Company, for determining its solvency under the Kentucky Insurance Law. The National Association of Insurance Commissioners’ (NAIC) Accounting Practices and Procedures manual (NAIC SAP) has been adopted as a component of prescribed or permitted practices by the state of Kentucky. The Commissioner of Insurance has the right to permit other specific practices that deviate from prescribed practices. No deviations exist.

A reconciliation of the Company’s net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the state of Kentucky is shown below:

	State of Domicile	2012		2011	
Net Income					
1. Humana Health Plan, Inc. Kentucky basis	KY	\$	(8,176,581)	\$	5,460,925
2. State Prescribed Practices that increase/(decrease) NAIC SAP	KY		-		-
3. State Permitted Practices that increase/(decrease) NAIC SAP	KY		-		-
4. NAIC SAP	KY	\$	(8,176,581)	\$	5,460,925
Surplus					
5. Humana Health Plan, Inc. Kentucky basis	KY	\$	263,689,505	\$	265,477,101
6. State Prescribed Practices that increase/(decrease) NAIC SAP	KY		-		-
7. State Permitted Practices that increase/(decrease) NAIC SAP	KY		-		-
8. NAIC SAP	KY	\$	263,689,505	\$	265,477,101

B. Use of Estimates in the Preparation of the Financial Statements

The preparation of financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. These estimates are based on knowledge of current events and anticipated future events, and accordingly, actual results could differ from those estimates.

C. Accounting Policy

Premiums are reported as earned in the period in which members are entitled to receive services, and are net of retroactive membership adjustments. Retroactive membership adjustments result from enrollment changes not yet processed, or not yet reported by an employer group or the government. Premiums received prior to such period are recorded as advance premiums.

Benefits incurred and loss adjustment expenses include claim payments, capitation payments, pharmacy costs net of rebates, allocations of certain centralized expenses, legal and administrative costs to settle claims, and various other costs incurred to provide health insurance coverage to members, as well as estimates of future payments to hospitals and others for medical care provided prior to the date of the statements of admitted assets, liabilities and surplus. Capitation payments represent monthly contractual fees disbursed to participating primary care physicians, and other providers who are responsible for providing medical care to members. Pharmacy costs represent payments for members’ prescription drug benefits, net of rebates from drug manufacturers.

In addition, the Company uses the following accounting policies:

- (1) Short-term investments include investments mainly in U.S. Government obligations with a maturity of twelve months or less from the date of purchase. Short-term investments are recorded at amortized cost. The carrying value of short-term investments approximates fair value due to the short-term maturities of the investments.
- (2)-(4) Investments are valued and classified in accordance with methods prescribed by the NAIC. Bonds with an NAIC rating of 1 or 2 are carried at amortized cost, with all other bonds being recorded at the lower of amortized cost or fair value; redeemable preferred stocks are carried at amortized cost; and non-redeemable preferred stocks are carried at fair value.

The Company regularly evaluates investment securities for impairment. The Company considers factors affecting the investee, factors affecting the industry the investee operates within, and general debt and equity market trends. The Company also considers the length of time an investment’s fair value has been below carrying value, the near term prospects for recovery to carrying value, and the Company’s intent and ability to hold the investment until maturity or market recovery is realized. If and when a determination is made that a decline in fair value below the cost basis is other-than-temporary, the related investment is written down to its estimated fair value through earnings.

Amortization of bond premium or discount is computed using the scientific interest method.

Income from investments is recorded on an accrual basis. For the purpose of determining realized gains and losses, the cost of securities sold is based upon specific identification. Investment income due and accrued over 90 days past due is nonadmitted.

- (5) The Company estimates the fair value of its investments in mortgage loans on real estate using a discounted cash flow method based on rating, maturity and future income when compared to the expected yield for mortgages having similar characteristics. The rating for mortgages in good standing is based on property type, location, market conditions, occupancy, debt service coverage, loan to value, caliber of tenancy, borrower and payment record. Problem mortgages are priced to reflect their monetary value to the Company, considering such things as the degree of default, whether or not the payments are still being made, interest rate, maturity and operating performance of the underlying collateral.

## STATEMENT AS OF MARCH 31, 2012 OF THE HUMANA HEALTH PLAN, INC.

### NOTES TO THE FINANCIAL STATEMENTS

- (6) For loan backed and structured securities where the securities fair value is less than the amortized cost, the Company considers several factors to determine if the security's impairment is other-than-temporary. If the Company has the intent to sell the security or if the Company does not have the intent and ability to retain the security until recovery of its fair value, the related investment is written down to its estimated fair value through earnings. If, however, the Company has the intent and ability to retain the security until recovery of its fair value, the Company considers factors affecting the investee, factors affecting the industry the investee operates within, and general debt and equity market trends. The Company also considers the length of time an investment's fair value has been below carrying value and the near term prospects for recovery to carrying value. If the determination is made, based on these factors, that the Company does expect to recover the entire amortized cost of the security, then an other-than-temporary impairment has not occurred. If, however, the determination is made that the Company does not expect to recover the entire amortized cost of the security based on the factors noted above, the Company recognizes a realized loss in earnings for the non-interest related decline. No loss is recognized for the interest impairment.
- (7) The Company accounts for its investments in subsidiaries using the audited statutory equity method of accounting.
- (8) The Company accounts for its investments in joint ventures, partnerships and LLC's using the audited statutory equity method of accounting.
- (9) The Company participates in a securities lending program to maximize investment income. The Company loans certain investment securities for short periods of time in exchange for collateral initially equal to at least 102 percent of the fair value of the investment securities on loan. The fair value of the loaned investment securities is monitored on a daily basis, with additional collateral obtained or refunded as the fair value of the loaned investment securities fluctuates. The collateral, which may be in the form of cash or U.S. Government securities, is deposited by the borrower with an independent lending agent.

- (10)-(11) The estimates of future medical benefit payments are developed using actuarial methods and assumptions based upon claim payment patterns, medical cost inflation, historical development such as claim inventory levels and claim receipt patterns, and other relevant factors. Corresponding administrative costs to process outstanding claims are estimated and accrued. Estimates of future payments relating to services incurred in the current and prior periods are continually reviewed by management and adjusted as necessary.

The Company assesses the profitability of its contracts for providing health insurance coverage to its members when current operating results or forecasts indicate probable future losses. The Company records a premium deficiency liability in current operations to the extent that the sum of expected future medical costs, claim adjustment expenses and maintenance costs exceed related future premiums. Investment income is not contemplated in the calculation of the premium deficiency liability.

Management believes the Company's benefits payable and loss adjustment expense are adequate to cover future claims and loss adjustment expense payments required, however, such estimates are based on knowledge of current events and anticipated future events and, therefore, the actual liability could differ from the amounts provided.

- (12) Real estate held for production of income is carried at depreciated cost.

Equipment is stated at cost less accumulated depreciation. Depreciation expense is computed using the straight-line method over estimated useful lives generally ranging from three to five years. Improvements to leased facilities are depreciated over the shorter of the remaining lease term or the anticipated life of the improvement.

The Company recognizes an asset or liability for the deferred tax consequences of temporary differences between the tax bases of assets or liabilities and their reported amounts in the financial statements. The temporary differences will result in taxable or deductible amounts in future years when the reported amounts of the assets or liabilities are recovered or settled.

- (13) The Company estimates anticipated Pharmacy Rebate Receivables using the analysis of historical recovery patterns.

#### 2. Accounting Changes and Corrections of Errors

Not Applicable.

#### 3. Business Combinations and Goodwill

##### A. Statutory Purchase Method

Not Applicable.

##### B. Statutory Merger

Not Applicable.

##### C. Assumption Reinsurance

Not Applicable.

##### D. Impairment Loss

Not Applicable.

#### 4. Discontinued Operations

Not Applicable.

STATEMENT AS OF MARCH 31, 2012 OF THE HUMANA HEALTH PLAN, INC.

NOTES TO THE FINANCIAL STATEMENTS

5. Investments

A. Mortgage Loans, Including Mezzanine Real Estate Loans

- (1) The maximum and minimum lending rates for the mortgage loan in 2012 were 1.9 percent and 1.56 percent.
- (2) During 2012 the Company did not reduce interest rates of the mortgage loan.
- (3) The maximum percentage of the loan to the value of the security at any time of the loan, exclusive of insured or guaranteed or purchase-money mortgages was 100 percent.

	Current Year	Prior Year
(4) As of year end, the Company held mortgages with interest more than 180 days past due with a recorded investment, excluding accrued interest	\$ -	\$ -
a. Total interest due on mortgages with interest more than 180 days past due	\$ -	\$ -
(5) Taxes, assessments and any amounts advanced and not included in the mortgage loan total	\$ -	\$ -
(6) Current year impaired loans with a related allowance for credit	\$ -	\$ -
a. Related allowance for credit losses	\$ -	\$ -
(7) Impaired mortgage loans without an allowance for credit losses	\$ -	\$ -
(8) Average recorded investment in impaired loans	\$ -	\$ -
(9) Interest income recognized during the period the loans were impaired	\$ -	\$ -
(10) Amount of interest income recognized on a cash basis during the period the loans were impaired	\$ -	\$ -
(11) Allowance for credit losses:		
a. Balance at beginning of period	\$ -	\$ -
b. Additions charged to operations	\$ -	\$ -
c. Direct write-downs charged against the allowances	\$ -	\$ -
d. Recoveries of amounts previously charged off	\$ -	\$ -
e. Balance at end of period	\$ -	\$ -
(12) Not Applicable.		

B. Debt Restructuring

Not Applicable.

C. Reverse Mortgages

Not Applicable.

D. Loan-Backed Securities

- (1) Not Applicable.
- (2) Not Applicable.
- (3) Not Applicable.

Gross unrealized losses and fair value aggregated by investment category and length of time that individual securities have been in a continuous unrealized loss position were as follows at March 31, 2012:

	2012					
	Less than 12 months		12 months or more		Total	
	Fair Value	Unrealized Losses	Fair Value	Unrealized Losses	Fair Value	Unrealized Losses
U.S. Governments	\$ 961,588	\$ (3,917)	\$ -	\$ -	\$ 961,588	\$ (3,917)
States, Territories, and Possessions	3,386,540	(30,256)	-	-	3,386,540	(30,256)
Political subdivisions of states, political subdivisions	8,340,521	(66,947)	9,409,063	(234,487)	17,749,584	(301,434)
Industrial and miscellaneous	28,259,400	(151,294)	201,128	(1,441)	28,460,528	(152,735)
Total invested assets	\$ 40,948,049	\$ (252,414)	\$ 9,610,191	\$ (235,928)	\$ 50,558,240	\$ (488,342)

	2011					
	Less than 12 months		12 months or more		Total	
	Fair Value	Unrealized Losses	Fair Value	Unrealized Losses	Fair Value	Unrealized Losses
U.S. Government loan-backed securities	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Other loan-backed securities	3,605,251	(42,300)	409,787	(2,693)	4,015,038	(44,993)
Total loan backed securities	\$ 3,605,251	\$ (42,300)	\$ 409,787	\$ (2,693)	\$ 4,015,038	\$ (44,993)

The unrealized losses at March 31, 2012 and December 31, 2011 were primarily due to increases in market interest rates and tighter liquidity conditions in the current markets than when the securities were purchased. All issuers of securities trading at an unrealized loss remain current on all contractual payments and the Company believes it is probable that all amounts due according to the contractual terms of the debt securities are collectible. After taking into account these and other factors, including the severity of the decline and the Company's ability and intent to hold these securities until recovery or maturity, the Company determined the unrealized losses on these investment securities were temporary and, as such, no impairment was required.



**STATEMENT AS OF MARCH 31, 2012 OF THE HUMANA HEALTH PLAN, INC.**

**NOTES TO THE FINANCIAL STATEMENTS**

E. Repurchase Agreements and/or Securities Lending Transactions

(1) The Company has no repurchase agreements.

(2) The Company has not pledged any of its assets as collateral.

(3)-(5) Not Applicable.

F. Real Estate

Not Applicable.

G. Low-Income Housing Tax Credits (LIHTC)

Not Applicable.

6. Joint Ventures, Partnerships and Limited Liability Companies

A. The Company has no investments in Joint Ventures, Partnerships or Limited Liability Companies that exceed 10.0 percent of its admitted assets.

B. The Company did not recognize any impairment write down for its investments in Joint Ventures, Partnerships and Limited Liability Companies during the statement periods.

7. Investment Income

A. Due and accrued income was excluded from surplus on the following basis:

All investment income due and accrued with amounts that are over 90 days past due with the exception of mortgage loan default.

B. The total amount excluded was \$0.

8. Derivative Instruments

Not Applicable.

9. Income Taxes

No material change since year-end December 31, 2011. The Company is still evaluating the impact of adopting SSAP 101.

10. Information Concerning Parent, Subsidiaries and Affiliates

A.-F. The Company has a management contract with Humana and other related parties whereby the Company is provided with medical and executive management, information systems, claims processing, billing and enrollment, and telemarketing and other services as required by the Company. Management fees charged to operations for the years ended December 31, 2011 and 2010 were approximately \$375.6 million and \$277.3 million respectively. As a part of this agreement, Humana makes cash disbursements on behalf of the Company which includes, but is not limited to, medical related items, general and administrative expenses, commissions and payroll. Humana is reimbursed by the Company weekly, based upon historical pattern of amounts and timing. Each month, these estimates are adjusted to ultimately settle upon actual disbursements made on behalf of the Company. As a result, any residual inter-Company balances are immediately settled in the following month. The Company continues to be primarily liable for any outstanding payments made on behalf of the Company, should Humana not be able to fulfill its obligations. No dividends were paid in 2012. At March 31, 2012, the Company reported \$2.5 million amounts due from Humana Inc. Amounts due to or from parent are generally settled within 30 days.

G. Not Applicable.

H. Not Applicable.

I. Not Applicable.

J. Not Applicable.

K. Not Applicable.

L. Not applicable.

11. Debt

A. Debt Including Capital Notes

The Company has no capital notes outstanding.

The Company has no debentures outstanding.

The Company does not have any reverse repurchase agreements.

B. Federal Home Loan Bank (FHLB) Agreements

The Company does not have any FHLB agreements.

12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

A. Defined Benefit Plan

Not Applicable.

B. Defined Contribution Plan

Not Applicable.

STATEMENT AS OF MARCH 31, 2012 OF THE HUMANA HEALTH PLAN, INC.

NOTES TO THE FINANCIAL STATEMENTS

C. Multiemployer Plans

Not Applicable.

D. Consolidated/Holding Company Plans

No material change since year-end December 31, 2011.

E. Post Employment Benefits and Compensated Absences

Not Applicable.

F. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)

Not Applicable

13. Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations

1) The company has \$1 par value common stock with 5,000,000 shares authorized and 2,248,000 shares issued and outstanding.

2) The Company has no preferred stock outstanding.

3-5) Dividends are noncumulative and are paid as determined by the Board of Directors. Dividends are subject to the approval of the Department of Insurance if such dividend distribution which, together with other dividends or distributions made within the preceding twelve months, exceeds the lesser of (a) 10 percent of the company's policyholder surplus as of December 31 of the prior year, or (b) the net income, for the twelve month period ending December 31 of the prior year.

Within the limitations above, there are no restrictions placed on the portion of Company profits that may be paid as ordinary dividends to stockholders.

No dividends were paid in 2012.

6) There were no restrictions placed on the Company's surplus, including for whom the surplus is being held.

7) Not Applicable.

8) Not Applicable.

9) Not Applicable.

10) The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and losses is \$135,000.

11) Not Applicable.

12) Not Applicable.

13) Not Applicable.

14. Contingencies

A. Contingent Commitments

Not Applicable.

B. Assessments

Not Applicable.

C. Gain Contingencies

Not Applicable.

D. Claims related extra contractual obligation and bad faith losses stemming from lawsuits

Not Applicable.

E. All Other Contingencies

During the ordinary course of business, the Company is subject to pending and threatened legal actions. Management of the Plan does not believe that any of these actions will have a material adverse effect on the Company's surplus, results of operations or cash flows. However, the likelihood or outcome of current or future legal proceedings cannot be accurately predicted, and they could adversely affect the Company's surplus, results of operations and cash flows.

The Company is not aware of any other material contingent liabilities as of March 31, 2012.

15. Leases

No material change since year-end December 31, 2011.

16. Information about Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentration of Credit Risk

1) The Company has no investment in Financial Instruments with Off Balance Sheet Risk.

2) The Company has no investment in Financial Instruments with Concentration Credit Risk.

17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

A. Transfers of Receivables Reported as Sales

Not Applicable.

STATEMENT AS OF MARCH 31, 2012 OF THE HUMANA HEALTH PLAN, INC.

NOTES TO THE FINANCIAL STATEMENTS

B. Transfer and Servicing of Financial Assets

Not Applicable.

C. Wash Sales

Not Applicable.

18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

A. ASO Plans

The gain from operations from Administrative Services Only (ASO) uninsured plans and the uninsured portion of partially insured plans was as follows during 2012:

	(1)		(2)		(3)	
	ASO Uninsured Plans		Uninsured Portion of Partially Insured Plans		Total ASO	
a. Net reimbursement for administrative expenses (including administrative fees) in excess of actual expenses	\$	31,606,619	\$	-	\$	31,606,619
b. Total net other income or expenses (including interest paid to or received from plans)	\$	1,583,860	\$	-	\$	1,583,860
c. Net gain or (loss) from operations	\$	33,190,479	\$	-	\$	33,190,479
d. Total claim payment volume	\$	1,024,078,552	\$	-	\$	1,024,078,552

B. ASC Plans

Not Applicable.

C. Medicare or Other Similarly Structured Cost Based Reimbursement Contract

- a. The Company records no revenue explicitly attributable to the cost share and reinsurance components of administered Medicare products.
- b. As of March 31, 2012, the Company has recorded a receivable from CMS of \$0.8 million related to the cost share and reinsurance components of administered Medicare products. The Company does not have any additional receivables greater than 10% of the Company's accounts receivable from uninsured Accident & Health Plans or \$10,000.
- c. The Company does not have any additional receivables from payors whose account balance is greater than 10% of the Company's accounts receivable from uninsured Accident & Health Plans or \$10,000.
- d. The Company has made no adjustment to revenue resulting from audit of receivables related to revenues recorded in the prior period.

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

Not Applicable.

20. Fair Value Measurements

A. (1) The fair value of financial assets at March 31, 2012 were as follows:

2012				
	Fair Value	Quoted Prices for Identical Assets in Active Markets (Level 1)	Significant Other Observable Inputs (Level 2)	Unobservable Inputs (Level 3)
Assets				
Tax-exempt municipal bonds	\$ 795,112	\$ -	\$ 795,112	\$ -
Corporate debt securities	58,061	-	58,061	-
Total invested assets	\$ 853,173	\$ -	\$ 853,173	\$ -

(2) There were no fair value measurements using significant unobservable inputs. The Company reports transfers between fair value hierarchy levels at the end of the reporting period. There were no transfers between the fair value hierarchy levels between December 31, 2011 and March 31, 2012.

(3) Fair value of actively traded debt securities are based on quoted market prices. Fair value of other debt securities are based on quoted market prices of identical or similar securities or based on observable inputs like interest rates generally using a market valuation approach, or, less frequently, an income valuation approach and are generally classified as Level 2. The Company generally obtains one quoted price for each security from a third party pricing service. These prices are generally derived from recently reported trades for identical or similar securities, including adjustments through the reporting date based upon observable market information. When quoted prices are not available, the third party pricing service may use quoted market prices of comparable securities or discounted cash flow analyses, incorporating inputs

## STATEMENT AS OF MARCH 31, 2012 OF THE HUMANA HEALTH PLAN, INC.

### NOTES TO THE FINANCIAL STATEMENTS

that are currently observable in the markets for similar securities. Inputs that are often used in the valuation methodologies include benchmark yields, reported trades, credit spreads, broker quotes, default rates and prepayment speeds. The Company is responsible for the determination of fair value and as such, the Company performs analysis on the prices received from the third party pricing service to determine whether the prices are reasonable estimates of fair value. The Company's analysis includes a review of monthly price fluctuations as well as a quarterly comparison of the prices received from the pricing service to prices reported by the Company's third party investment advisor. Based on the Company's internal price verification procedures and review of fair value methodology documentation provided by the third party pricing service, there were no material adjustments to the prices obtained from the third party pricing service during the quarter ended March 31, 2012.

#### 21. Other Items

##### A. Extraordinary Items

Not Applicable.

##### B. Troubled Debt Restructuring

Not Applicable.

##### C. Other Disclosures

Not Applicable.

##### D. Disclose the nature of any portion of the balance that is reasonably possible to be uncollectible for assets covered by SSAP No. 6, Uncollected Premium Balances, Bill Receivable for Premiums, and Amounts Due From Agents and Brokers, SSAP No. 47, Uninsured Plans, or SSAP No. 66, Retrospectively Rated Contracts.

Not Applicable.

##### E. Business Interruption Insurance Recoveries

Not Applicable.

##### F. State Transferable Tax Credits

Not Applicable.

##### G. Subprime Mortgage Related Risk Exposure

The Company consults with its external investment managers to assess its subprime mortgage related risk exposure. Certain characteristics are utilized to determine if a mortgage-backed security has subprime exposure. The main characteristics reviewed when determining this are the collateral and structure of the security, the loan purpose, loan documentation, occupancy, geographical location, loan size and type. Subprime mortgage borrowers typically have lower credit scores, lower loan balances and higher loan-to-values than other conforming loans. Management's practices include reviewing quantitative and qualitative credit models that analyze loan-level collateral composition, historical underwriter performance trends, the impact of macroeconomic factors, and issuer risks; as well as reviewing the estimation of security cash flows and monthly model calibrations.

##### (1) Direct exposure through investments in sub-prime mortgage loans.

The Company has no direct exposure through investment to sub-prime mortgage loans.

##### (2) Indirect exposure to sub-prime mortgage risk through investments in the following securities:

- a. Residential mortgage backed securities – No exposure noted.
- b. Collateralized debt obligations – No exposure noted.
- c. Structured Securities (including principal protected notes) – No exposure noted.
- d. Debt Securities of companies with significant sub-prime exposure – No exposure noted.
- e. Equity securities of companies with significant sub-prime exposure – No exposure noted.
- f. Other Assets – No exposure noted.

##### (3) Underwriting exposure to sub-prime mortgage risk through Mortgage Guaranty coverage, Financial Guaranty coverage, Directors and Officers liability coverage, or Errors and Omissions liability coverage.

Not Applicable.

##### (4) Classification of mortgage related securities is primarily based on information from outside data services, including rating agency actions. When considering our exposure, the Company evaluated the percentage of full documentation loans, percent of owner occupied properties, FICO scores, average margin for ARM loans, percent of loans with prepayment penalties, the existence of non-traditional underwriting standards, among other factors.

#### 22. Events Subsequent

The Company is not aware of any events occurring subsequent to the close of the books for this statement which may have a material effect on its financial condition. Subsequent events have been considered through May 10, 2012 for the statutory statement issued on May 10, 2012.

**STATEMENT AS OF MARCH 31, 2012 OF THE HUMANA HEALTH PLAN, INC.**

**NOTES TO THE FINANCIAL STATEMENTS**

23. Reinsurance

A. Ceded Reinsurance Report

Section 1 – General Interrogatories

- (1) Are any of the reinsurers, listed in Schedule S as non-affiliated, owned in excess of 10.0 percent or controlled, either directly or indirectly, by the company or by any representative, officer, trustee, or director of the company?

Yes ( ) No ( X )

If yes, give full details.

- (2) Have any policies issued by the company been reinsured with a company chartered in a country other than the United States (excluding U.S. Branches of such companies) that is owned in excess of 10.0 percent or controlled directly or indirectly by an insured, a beneficiary, a creditor or an insured or any other person not primarily engaged in the insurance business?

Yes ( ) No ( X )

If yes, give full details.

Section 2 – Ceded Reinsurance Report – Part A

- (1) Does the company have any reinsurance agreements in effect under which the reinsurer may unilaterally cancel any reinsurance for reasons other than for nonpayment of premium or other similar credits?

Yes ( ) No ( X )

- a. If yes, what is the estimated amount of the aggregate reduction in surplus of a unilateral cancellation by the reinsurer as of the date of this statement, for those agreements in which cancellation results in a net obligation is not presently accrued? Where necessary, the reporting entity may consider the current or anticipated experience of the business reinsured in making this estimate. \$0
- b. What is the total amount of reinsurance credits taken, whether as an asset or as a reduction of liability, for these agreements in this statement? \$0

- (2) Does the reporting entity have any reinsurance agreements in effect such that the amount of losses paid or accrued through the statement date may result in a payment to the reinsurer of amounts that, in aggregate and allowing for offset of mutual credits from other reinsurance agreements with the same reinsurer, exceed the total direct premium collected under the reinsured policies?

Yes ( ) No ( X )

If yes, give full details.

Section 3 – Ceded Reinsurance Report – Part B

- (1) What is the estimated amount of the aggregate reduction in surplus, (for agreements other than those under which the reinsurer may unilaterally cancel for reasons other than for nonpayment of premium or other similar credits that are reflected in Section 2 above) of termination of ALL reinsurance agreements, by either party, as of the date of this statement? Where necessary, the company may consider the current or anticipated experience of the business reinsured in making this estimate. \$0

- (2) Have any new agreements been executed or existing agreements amended, since January 1 of the year of this statement, to include policies or contracts that were in force or which had existing reserves established by the company as of the effective date of the agreement?

Yes ( ) No ( X )

If yes, what is the amount of reinsurance credits, whether an asset or a reduction of liability, taken for such new agreements or amendments? \$0

B. Uncollectible Reinsurance

Not Applicable.

C. Commutation of Ceded Reinsurance

Not Applicable.

24. Retrospectively Rated Contracts and Contracts Subject to Redetermination

- A. The Company estimates accrued retrospective premium adjustments for its Medicare business through a mathematical approach using an algorithm based upon settlement procedures defined by contracts with CMS.
- B. The Company records accrued retrospective premium as an adjustment to earned premiums.
- C. The amount of net premiums written by the Company at March 31, 2012 that are subject to retrospective rating features was \$35.7 million, or 4.86 percent. No other net premiums written by the Company are subject to retrospective rating features.

STATEMENT AS OF MARCH 31, 2012 OF THE HUMANA HEALTH PLAN, INC.

NOTES TO THE FINANCIAL STATEMENTS

D. Medical loss ratio rebates required pursuant to the Public Health Service Act.

	Individual	Small Group Employer	Large Group Employer	Other Categories with rebates	Total
Prior Reporting Year:					
Medical loss ratio rebates incurred	\$ 9,700	\$7,064,966	\$4,403,392	\$ -	\$11,477,058
Medical loss ratio rebates paid	-	-	-	-	-
Medical loss rebates unpaid	9,700	7,064,966	4,403,392	-	11,477,058
Plus reinsurance assumed amounts	-	-	-	-	-
Less reinsurance ceded amounts	-	-	-	-	-
Rebates unpaid net of reinsurance	-	-	-	-	-

Current Reporting Year-to-date:					
Medical loss ratio rebates incurred	\$ 23,912	\$1,104,480	\$2,110,002	\$ -	\$3,238,494
Medical loss ratio rebates paid	-	-	-	-	-
Medical loss rebates unpaid	33,612	8,169,446	6,513,394	-	14,716,452
Plus reinsurance assumed amounts	-	-	-	-	-
Less reinsurance ceded amounts	-	-	-	-	-
Rebates unpaid net of reinsurance	-	-	-	-	-

25. Change in Incurred Claims and Claim Adjustment Expenses

Reserves as of December 31, 2011 were \$186.7million. As of March 31, 2012, \$146.9million has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$28.4 million as a result of reestimation of unpaid claims and claim adjustment expenses principally on the commercial HMO and PPO books of business. Therefore, there has been a \$11.4 million favorable prior-year development since December 31, 2011. The decrease is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased as additional information becomes known regarding individual claims. The Company has no retrospectively rated policies.

26. Intercompany Pooling Arrangements

A.-F. Not Applicable.

27. Structured Settlements

Not Applicable.

28. Health Care Receivables

A. Pharmaceutical Rebate Receivables

Quarter	Estimate Pharmacy Rebates as Reported on Financial Statements		Pharmacy Rebates as Billed or Otherwise Confirmed		Actual Rebates Received Within 90 Days of Billing		Actual Rebates Received Within 91 to 180 Days of Billing		Actual Rebates Received More than 181 Days after Billing	
3/31/2012	\$	10,706,710	\$	10,706,710	\$	-	\$	-	\$	-
12/31/2011	\$	6,238,730	\$	6,238,730	\$	6,238,730	\$	-	\$	-
9/30/2011	\$	6,622,552	\$	6,622,552	\$	6,622,552	\$	-	\$	-
6/30/2011	\$	7,248,706	\$	7,248,706	\$	7,248,706	\$	-	\$	-
3/31/2011	\$	6,319,618	\$	6,319,618	\$	6,319,618	\$	-	\$	-
12/31/2010	\$	6,145,560	\$	6,145,560	\$	6,145,560	\$	-	\$	-
9/30/2010	\$	5,910,198	\$	5,910,198	\$	5,910,198	\$	-	\$	-
6/30/2010	\$	7,414,654	\$	7,414,654	\$	7,414,654	\$	-	\$	-
3/31/2010	\$	4,991,220	\$	4,991,220	\$	4,991,220	\$	-	\$	-
12/31/2009	\$	5,322,832	\$	5,322,832	\$	5,322,832	\$	-	\$	-
9/30/2009	\$	6,375,850	\$	6,375,850	\$	6,375,850	\$	-	\$	-
6/30/2009	\$	6,514,874	\$	6,514,874	\$	6,514,874	\$	-	\$	-
3/31/2009	\$	6,602,391	\$	6,602,391	\$	6,602,391	\$	-	\$	-

B. Risk Sharing Receivables

Risk Sharing receivables include estimated recoveries on plan to plan and state to plan adjustments attributable to benefits paid for Medicare beneficiaries. These estimated recoveries from other Medicare carriers and state Medicaid plans are recorded based upon reported overpayments, adjusted for historical recovery patterns.

29. Participating Policies

Not Applicable.

STATEMENT AS OF MARCH 31, 2012 OF THE HUMANA HEALTH PLAN, INC.

NOTES TO THE FINANCIAL STATEMENTS

30. Premium Deficiency Reserves

- |    |  |  |
|----|--|--|
| 1. | Liability carried for premium deficiency reserves              | \$730,000  |
| 2. | Date of the most recent evaluation of this liability           | March 31, 2012   |
| 3. | Was anticipated investment income utilized in the calculation? | Yes ( <input type="checkbox"/> )    No ( <input checked="" type="checkbox"/> ) |

31. Anticipated Salvage and Subrogation

Not Applicable.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES  
GENERAL

- 1.1

Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act?

Yes ☐ No ☒
- 1.2

If yes, has the report been filed with the domiciliary state?

Yes ☐ No ☐
- 2.1

Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?

Yes ☐ No ☒
- 2.2

If yes, date of change:
3.

Have there been any substantial changes in the organizational chart since the prior quarter end?

Yes ☒ No ☐

If yes, complete the Schedule Y - Part 1 - organizational chart.
- 4.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?

Yes ☐ No ☒
- 4.2

If yes, provide the name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1	2	3
Name of Entity	NAIC Company Code	State of Domicile

5.

If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved?

Yes ☐ No ☒ NA ☐

If yes, attach an explanation.
- 6.1

State as of what date the latest financial examination of the reporting entity was made or is being made.

12/31/2008
- 6.2

State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.

12/31/2008
- 6.3

State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).

12/20/2010
- 6.4

By what department or departments?

Kentucky Department of Insurance
- 6.5

Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?

Yes ☒ No ☐ NA ☐
- 6.6

Have all of the recommendations within the latest financial examination report been complied with?

Yes ☒ No ☐ NA ☐
- 7.1

Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?

Yes ☐ No ☒
- 7.2

If yes, give full information:
- 8.1

Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?

Yes ☐ No ☒
- 8.2

If response to 8.1 is yes, please identify the name of the bank holding company.
- 8.3

Is the company affiliated with one or more banks, thrifts or securities firms?

Yes ☐ No ☒
- 8.4

If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.]

1	2	3	4	5	6
Affiliate Name	Location (City, State)	FRB	OCC	FDIC	SEC



GENERAL INTERROGATORIES

- 9.1

Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? .....  
(a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;  
(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;  
(c) Compliance with applicable governmental laws, rules and regulations;  
(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and  
(e) Accountability for adherence to the code.

Yes [X] No [ ]
- 9.11

If the response to 9.1 is No, please explain:  
.....
- 9.2

Has the code of ethics for senior managers been amended? .....

Yes [ ] No [X]
- 9.21

If the response to 9.2 is Yes, provide information related to amendment(s).  
.....
- 9.3

Have any provisions of the code of ethics been waived for any of the specified officers? .....

Yes [ ] No [X]
- 9.31

If the response to 9.3 is Yes, provide the nature of any waiver(s).  
.....

FINANCIAL

- 10.1

Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?.....

Yes [X] No [ ]
- 10.2

If yes, indicate any amounts receivable from parent included in the Page 2 amount:.....\$ .....2,466,372

INVESTMENT

- 11.1

Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) .....

Yes [ ] No [X]
- 11.2

If yes, give full and complete information relating thereto:  
.....
12.

Amount of real estate and mortgages held in other invested assets in Schedule BA: .....\$ .....0
13.

Amount of real estate and mortgages held in short-term investments: .....\$ .....0
- 14.1

Does the reporting entity have any investments in parent, subsidiaries and affiliates? .....

Yes [X] No [ ]
- 14.2

If yes, please complete the following:

	1	2
	Prior Year-End Book/Adjusted Carrying Value	Current Quarter Book/Adjusted Carrying Value
14.21 Bonds .....	\$ .....0	\$ .....0
14.22 Preferred Stock .....	\$ .....0	\$ .....0
14.23 Common Stock .....	\$ .....30,779,448	\$ .....30,749,294
14.24 Short-Term Investments .....	\$ .....0	\$ .....0
14.25 Mortgage Loans on Real Estate .....	\$ .....0	\$ .....0
14.26 All Other .....	\$ .....0	\$ .....0
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26).....	\$ .....30,779,448	\$ .....30,749,294
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above .....	\$ .....0	\$ .....0

- 15.1

Has the reporting entity entered into any hedging transactions reported on Schedule DB? .....

Yes [ ] No [X]
- 15.2

If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? .....

Yes [ ] No [ ]
- If no, attach a description with this statement.

GENERAL INTERROGATORIES

16. Excluding items in Schedule E – Part 3 – Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity’s offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III – General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC *Financial Condition Examiners Handbook*? .....

Yes [X] No [ ]

16.1 For all agreements that comply with the requirements of the NAIC *Financial Condition Examiners Handbook*, complete the following:

1 Name of Custodian(s)	2 Custodian Address
JP Morgan Chase.....	4 New York Plaza, 15th Floor, New York, NY 10004-2413, Attn: Charles Tuzzolino.....

16.2 For all agreements that do not comply with the requirements of the NAIC *Financial Condition Examiners Handbook*, provide the name, location and a complete explanation:

1 Name(s)	2 Location(s)	3 Complete Explanation(s)

16.3 Have there been any changes, including name changes, in the custodian(s) identified in 16.1 during the current quarter? .....

Yes [ ] No [X]

16.4 If yes, give full and complete information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason

16.5 Identify all investment advisors, broker/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1 Central Registration Depository	2 Name(s)	3 Address
107105.00.....	Blackrock, Inc.....	40 East 52nd Street, New York, NY 10022....

17.1 Have all the filing requirements of the *Purposes and Procedures Manual* of the NAIC Securities Valuation Office been followed? .....

Yes [X] No [ ]

17.2 If no, list exceptions:  
.....

GENERAL INTERROGATORIES  
PART 2 - HEALTH

1 Operating Percentages	
1.1 A&H loss percent.....	90.5 %
1.2 A&H cost containment percent .....	3.9 %
1.3 A&H expense percent excluding cost containment expenses.....	11.1 %
2.1 Do you act as a custodian for health savings accounts?.....	Yes [ ] No [X]
2.2 If yes, please provide the amount of custodial funds held as of the reporting date.....	\$
2.3 Do you act as an administrator for health savings accounts?.....	Yes [ ] No [X]
2.4 If yes, please provide the balance of the funds administered as of the reporting date.....	\$

**STATEMENT AS OF MARCH 31, 2012 OF THE Humana Health Plan, Inc.**

## SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

1 NAIC Company Code	2 Federal ID Number	3 Effective Date	4 Name of Reinsurer	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Is Insurer Authorized? (Yes or No)
			NONE			

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories										
		1	Direct Business Only							
			2	3	4	5 Federal Employees Health Benefits Program Premiums	6 Life & Annuity Premiums & Other Considerations	7 Property/ Casualty Premiums	8 Total Columns 2 Through 7	9 Deposit-Type Contracts
States, Etc.		Active Status	Accident & Health Premiums	Medicare Title XVIII	Medicaid Title XIX					
1. Alabama	AL	L	21,539	20,736,316	0	0			20,757,855	
2. Alaska	AK	N	0	0	0	0			0	
3. Arizona	AZ	L	10,918,448	51,401,773	0	0			62,320,221	
4. Arkansas	AR	L	136,494	27,895,192	0	0			28,031,686	
5. California	CA	N	0	0	0	0			0	
6. Colorado	CO	L	14,412,324	17,869,948	0	0			32,282,272	
7. Connecticut	CT	N	0	0	0	0			0	
8. Delaware	DE	N	0	0	0	0			0	
9. Dist. Columbia	DC	N	0	0	0	0			0	
10. Florida	FL	N	0	0	0	0			0	
11. Georgia	GA	N	0	0	0	0			0	
12. Hawaii	HI	N	0	0	0	0			0	
13. Idaho	ID	L	75,078	8,218,881	0	0			8,293,959	
14. Illinois	IL	L	37,984,588	88,505,108	0	22,909,704			149,399,400	
15. Indiana	IN	L	3,849,886	12,261,622	0	0			16,111,508	
16. Iowa	IA	N	0	0	0	0			0	
17. Kansas	KS	L	935,039	33,640,031	0	7,548,278			42,123,348	
18. Kentucky	KY	L	101,016,518	12,530,198	0	1,362,550			114,909,266	
19. Louisiana	LA	N	0	0	0	0			0	
20. Maine	ME	N	0	0	0	0			0	
21. Maryland	MD	N	0	0	0	0			0	
22. Massachusetts	MA	N	0	0	0	0			0	
23. Michigan	MI	N	0	0	0	0			0	
24. Minnesota	MN	N	0	0	0	0			0	
25. Mississippi	MS	N	0	0	0	0			0	
26. Missouri	MO	L	1,438,692	56,439,700	0				57,878,392	
27. Montana	MT	N	0	0	0	0			0	
28. Nebraska	NE	L	26,959	5,808,613	0	0			5,835,572	
29. Nevada	NV	L	812,855	113,364,658	0	0			114,177,513	
30. New Hampshire	NH	N	0	0	0	0			0	
31. New Jersey	NJ	N	0	0	0	0			0	
32. New Mexico	NM	L	18,271	5,435,645	0	0			5,453,916	
33. New York	NY	N	0	0	0	0			0	
34. North Carolina	NC	N	0	0	0	0			0	
35. North Dakota	ND	N	0	0	0	0			0	
36. Ohio	OH	N	0	0	0	0			0	
37. Oklahoma	OK	N	0	0	0	0			0	
38. Oregon	OR	N	0	0	0	0			0	
39. Pennsylvania	PA	N	0	0	0	0			0	
40. Rhode Island	RI	N	0	0	0	0			0	
41. South Carolina	SC	L	5,848	18,136,606	0	0			18,142,454	
42. South Dakota	SD	N	0	0	0	0			0	
43. Tennessee	TN	L	15,490,251	0	0	73,644			15,563,895	
44. Texas	TX	N	0	0	0	0			0	
45. Utah	UT	N	0	0	0	0			0	
46. Vermont	VT	N	0	0	0	0			0	
47. Virginia	VA	L	9,650	26,509,347	0	0			26,518,997	
48. Washington	WA	L	145,051	17,260,095	0	0			17,405,146	
49. West Virginia	WV	L	0	0	0	0			0	
50. Wisconsin	WI	N	0	0	0	0			0	
51. Wyoming	WY	N	0	0	0	0			0	
52. American Samoa	AS	N							0	
53. Guam	GU	N							0	
54. Puerto Rico	PR	N				0			0	
55. U.S. Virgin Islands	VI	N							0	
56. Northern Mariana Islands	MP	N							0	
57. Canada	CN	N							0	
58. Aggregate other alien	OT	XXX	0	0	0	0	0	0	0	0
59. Subtotal	XXX		187,297,491	516,013,733	0	31,894,176	0	0	735,205,400	0
60. Reporting entity contributions for Employee Benefit Plans	XXX								0	
61. Total (Direct Business)	(a) 18		187,297,491	516,013,733	0	31,894,176	0	0	735,205,400	0
DETAILS OF WRITE-INS										
5801.		XXX							0	
5802.		XXX							0	
5803.		XXX							0	
5898. Summary of remaining write-ins for Line 58 from overflow page.		XXX	0	0	0	0	0	0	0	0
5899. Totals (Lines 5801 through 5803 plus 5898) (Line 58 above)		XXX	0	0	0	0	0	0	0	0

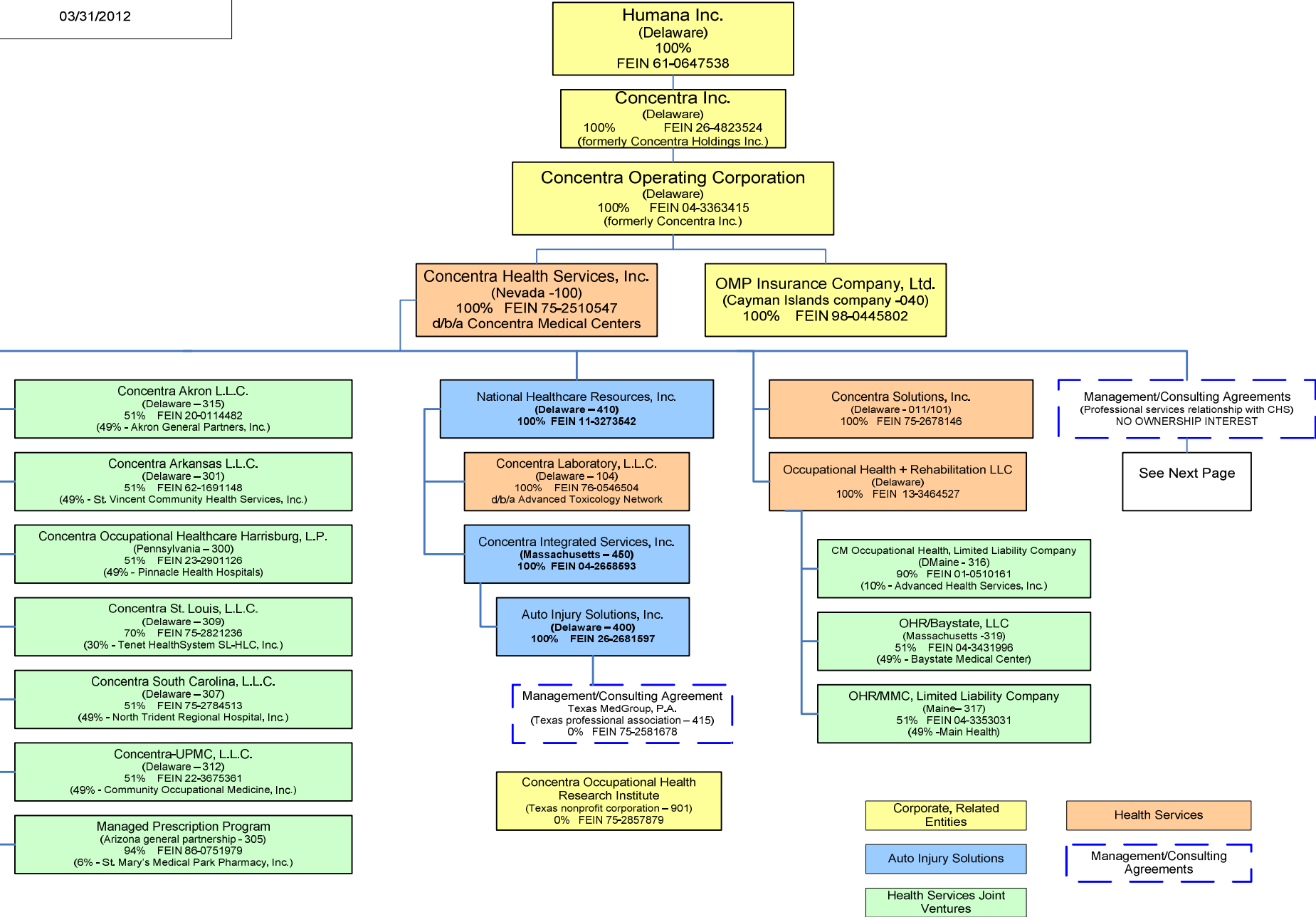
(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business in the state.  
(a) Insert the number of L responses except for Canada and other Alien.

**SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 - ORGANIZATIONAL CHART**



SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 - ORGANIZATIONAL CHART

03/31/2012



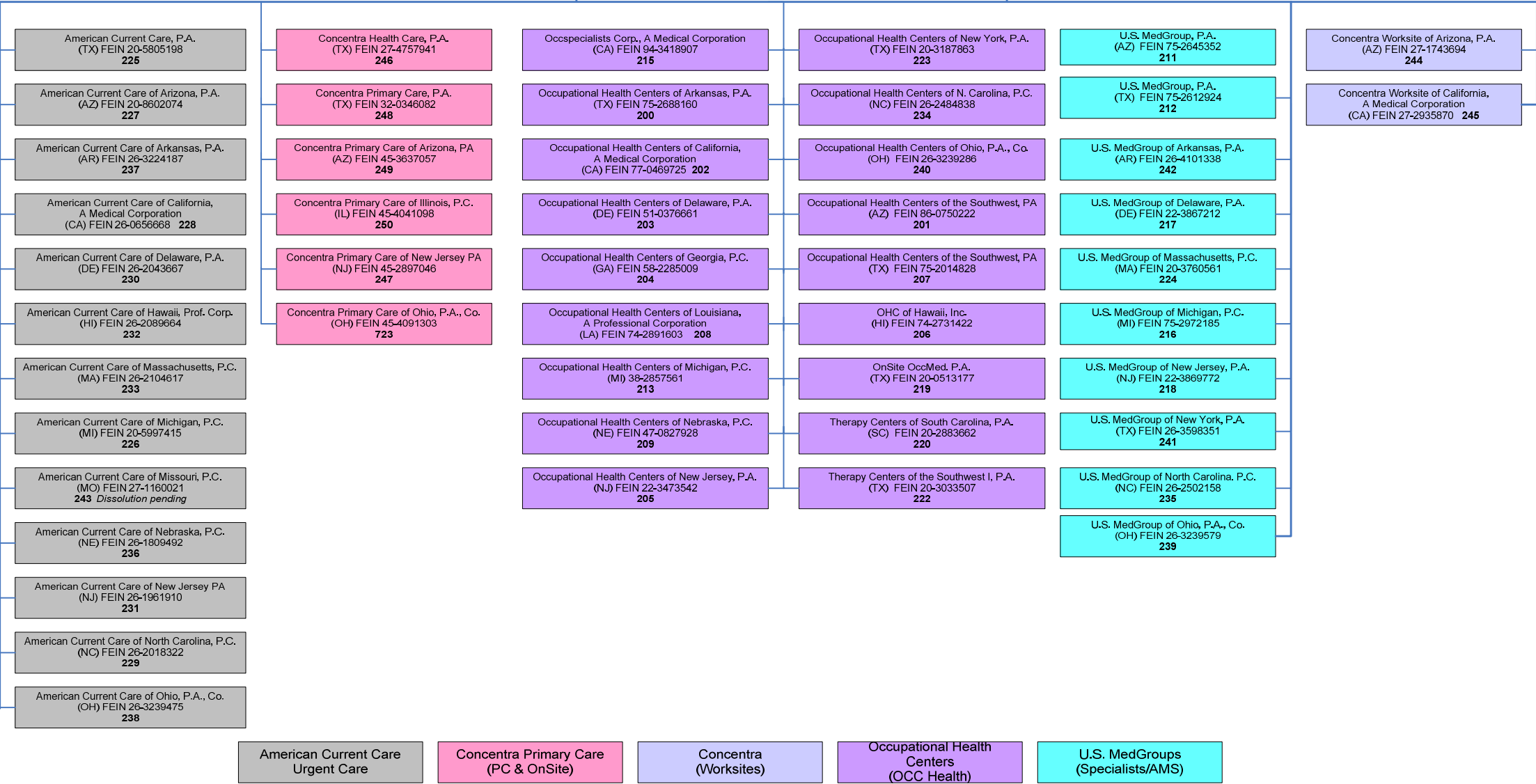
SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 - ORGANIZATIONAL CHART

03/31/2012

Management/Consulting Agreements  
(Professional services relationship with CHS)

NO OWNERSHIP INTEREST

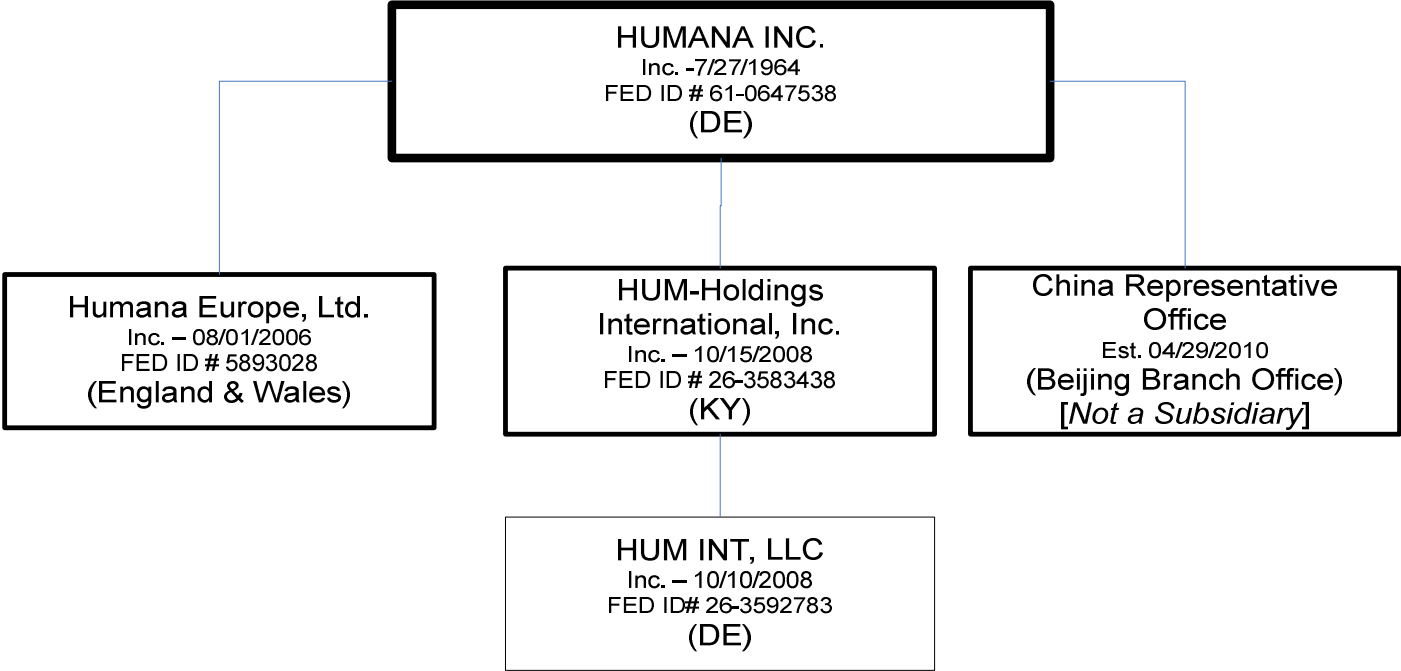
15.2





SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 - ORGANIZATIONAL CHART

HUMANA INTERNATIONAL SUBSIDIARIES



STATEMENT AS OF MARCH 31, 2012 OF THE Humana Health Plan, Inc.

SCHEDULE Y  
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Name of Parent Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/ Person(s)	*
00001.....	Humana Inc.....	00000.....	39-1514846.....				CareNetwork, Inc.....	WI.....	NIA.....	Humana Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00002.....	Humana Inc.....	95885.....	61-1013183.....				Humana Health Plan, Inc.....	KY.....	OTH.....	Humana Inc.....	Ownership.....	100.0.....	Humana Inc.....	19
00003.....	Humana Inc.....	73288.....	39-1263473.....				Humana Insurance Company .....	WI.....	IA.....	CareNetwork, Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00004.....	Humana Inc.....	95519.....	58-2209549.....				Humana Employers Health Plan of GA, Inc.....	GA.....	IA.....	Humana Insurance Company.....	Ownership.....	100.0.....	Humana inc.....	
00005.....	Humana Inc.....	60219.....	61-1311685.....				Humana Insurance Company of Kentucky.....	KY.....	IA.....	Humana Insurance Company.....	Ownership.....	100.0.....	Humana Inc.....	
00006.....	Humana Inc.....	54739.....	52-1157181.....				The Dental Concern, Inc. .....	KY.....	IA.....	HumanaDental, Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00007.....	Humana Inc.....	52028.....	36-3654697.....				The Dental Concern, Ltd. .....	IL.....	IA.....	HumanaDental, Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00008.....	Humana Inc.....	95342.....	39-1525003.....				Humana Wisc. Health Org. Ins. Corp.....	WI.....	IA.....	CareNetwork, Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00009.....	Humana Inc.....	00000.....	61-1223418.....				Health Value Management, Inc.....	DE.....	NIA.....	Humana Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00010.....	Humana Inc.....	69671.....	61-1041514.....				Humana Health Ins. Co. of Florida, Inc.....	FL.....	IA.....	Humana Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00011.....	Humana Inc.....	00000.....	31-1154200.....				Humana Health Plan of Ohio, Inc.....	OH.....	IA.....	Humana Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00012.....	Humana Inc.....	95024.....	61-0994632.....				Humana Health Plan of Texas, Inc. .....	TX.....	IA.....	Humana Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00013.....	Humana Inc.....	95270.....	61-1103898.....				Humana Medical Plan, Inc.....	FL.....	IA.....	Humana Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00014.....	Humana Inc.....	00000.....	61-1241225.....				Humana Military Healthcare Services, Inc.....	DE.....	NIA.....	Humana Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00015.....	Humana Inc.....	00000.....	61-1232669.....				Managed Care Indemnity, Inc.....	VT.....	IA.....	Humana Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00016.....	Humana Inc.....	00000.....	61-1343508.....				Humana MarketPOINT, Inc.....	KY.....	NIA.....	Humana Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00017.....	Humana Inc.....	00000.....	61-1239538.....				Humco, Inc.....	KY.....	DS.....	Humana Health Plan, Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	66-0406896.....				Humana Health Plans of Puerto Rico, Inc.....	PR.....	IA.....	Humana Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	84603.....	66-0291866.....				Humana Insurance of Puerto Rico, Inc.....	PR.....	IA.....	Humana Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	61-1364005.....				HumanaDental, Inc.....	DE.....	NIA.....	Humana Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	70580.....	39-0714280.....				HumanaDental Insurance Company.....	WI.....	IA.....	HumanaDental, Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	61-1237697.....				Emphesys, Inc.....	DE.....	NIA.....	Humana Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	88595.....	31-0935772.....				Emphesys Insurance Company.....	TX.....	IA.....	Emphesys, Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	61-0647538.....		0000049071	NYSE.....	Humana Inc.....	DE.....	UDP.....	Humana Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	61-1316926.....				Humana Pharmacy, Inc.....	DE.....	NIA.....	Humana Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	61-1383567.....				HUM-e-FL, Inc.....	FL.....	NIA.....	Humana Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	42-1575099.....				Competitive Health Analytics, Inc.....	IL.....	NIA.....	Humana Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	71-0732385.....				Humana Health Plan Interests, Inc.....	LA.....	NIA.....	Humana Insurance Company.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	95642.....	72-1279235.....				Humana Health Benefit Plan of LA, Inc.....	LA.....	IA.....	Humana Health Plan Interests, Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	61-1343791.....				Humana Innovation Enterprises, Inc.....	DE.....	NIA.....	Humana Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	20-1724127.....				Preservation on Main, Inc.....	KY.....	NIA.....	Humana Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	26-0010657.....				CAC-Florida Medical Centers, LLC.....	FL.....	NIA.....	Humana Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	95092.....	59-2598550.....				CarePlus Health Plans, Inc.....	FL.....	IA.....	CPHP Holdings, Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	75-2043865.....				Corphealth, Inc.....	TX.....	NIA.....	Humana Inc.....	Ownership.....	100.0.....	Humana Inc.....	

STATEMENT AS OF MARCH 31, 2012 OF THE Humana Health Plan, Inc.

SCHEDULE Y  
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Name of Parent Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/ Person(s)	*
00119.....	Humana Inc.....	00000.....	30-0117876.....				CPHP Holdings, Inc. American Tax Credit Corp GA Fund III, LLC	FL	NIA	Humana Inc.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	61-1478012.....					DE	OTH	See Footnote 1.....	Other Board of Directors.....		Humana Inc.....	1
00119.....	Humana Inc.....	00000.....	59-3715944.....				Availity, L.L.C.....	DE	OTH	See Footnote 2.....	Ownership.....	100.0	Humana Inc.....	2
00119.....	Humana Inc.....	00000.....	61-1279716.....				CHA Service Company.....	KY	DS	Humana Health Plan, Inc.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	95158.....	61-1279717.....				CHA HMO, Inc.....	KY	DS	CHA Service Company.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	20-2620891.....				Green Ribbon Health, L.L.C. Healthcare E-Commerce Initiative, Inc.....	DE	OTH	See Footnote 3.....	Other.....		Humana Inc.....	3
00119.....	Humana Inc.....	00000.....					Humana Active Outlook, Inc.....	PR	OTH	See Footnote 4.....	Other.....		Humana Inc.....	4
00119.....	Humana Inc.....	00000.....	20-4835394.....				Humana Govt. Network Services, Inc.....	KY	NIA	Humana Inc.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	20-1717441.....				Independent Care Health Plan.....	DE	NIA	Humana Military Healthcare Services, Inc.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	39-1769093.....				Sensei, Inc.....	WI	OTH	See Footnote 5.....	Other.....		Humana Inc.....	5
00119.....	Humana Inc.....	00000.....	20-3355580.....				515-526W MainSt CondoCouncilofCo-Owners.....	DE	OTH	See Footnote 6.....	Other.....		Humana Inc.....	6
00119.....	Humana Inc.....	00000.....	20-5309363.....				Corphealth Provider Link, Inc.....	KY	NIA	Preservation on Main, Inc.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	20-8236655.....				DefenseWeb Technologies, Inc.....	TX	NIA	Humana Inc.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	33-0916248.....				Humana Insurance Company of New York.....	DE	NIA	Humana Inc.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	12634.....	20-2888723.....				Humana MarketPOINT of Puerto Rico, Inc.....	NY	IA	Humana Inc.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	20-3364857.....				Humana Medical Plan of Utah, Inc.....	PR	NIA	Humana Inc.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	12908.....	20-8411422.....				Humana Veterans Healthcare Services, Inc.....	UT	IA	Humana Inc.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	20-8418853.....				American Dental Plan of N. C., Inc.....	DE	NIA	Humana Military Healthcare Services, Inc.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	95107.....	56-1796975.....				American Dental Providers of Ark., Inc.....	NC	IA	Humana Dental Company.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	11559.....	58-2302163.....				CompBenefits Company.....	AR	IA	Humana Dental Company.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	52015.....	59-2531815.....				CompBenefits Corporation.....	FL	IA	Humana Dental Company.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	04-3185995.....				Humana Dental Company.....	DE	NIA	Humana Inc.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	59-1843760.....				CompBenefits Corporation.....	FL	NIA	Humana Inc.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	11228.....	36-3686002.....				Dental Care Plus Management Corporation.....	IL	IA	Humana Dental Company.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	58-2228851.....				CompBenefits Direct, Inc.....	TX	NIA	Humana Dental Company.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	60984.....	74-2552026.....				CompBenefits of Alabama, Inc.....	TX	IA	Humana Dental Company.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	12250.....	63-1063101.....				CompBenefits of Georgia, Inc.....	AL	IA	HumanaCares, Inc.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	58-2198538.....				Dental Care Plus Management Corp.....	GA	IA	HumanaCares, Inc.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	36-3512545.....				DentiCare, Inc.....	IL	NIA	Humana Dental Company.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	95161.....	76-0039628.....				Kanawha HealthCare Solutions, Inc.....	TX	IA	Humana Dental Company.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	62-1245230.....				KMG America Corporation.....	TN	IA	Humana Dental Company.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	65110.....	57-0380426.....				HumanaCares, Inc.....	SC	IA	Humana Dental Company.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	20-1377270.....				Texas Dental Plans, Inc.....	VA	NIA	Humana Inc.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	65-0274594.....					FL	NIA	Humana Dental Company.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	74-2352809.....					TX	IA	Humana Dental Company.....	Ownership.....	100.0	Humana Inc.....	

STATEMENT AS OF MARCH 31, 2012 OF THE Humana Health Plan, Inc.

SCHEDULE Y  
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Name of Parent Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/ Person(s)	*
00119.....	Humana Inc.....	95754.....	62-1579044.....				Cariten Health Plan Inc.....	TN.....	IA.....	PHP Companies, Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	82740.....	62-0729865.....				Cariten Insurance Company.....	TN.....	IA.....	PHP Companies, Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	10126.....	65-1137990.....				Humana AdvantageCare Plan, Inc.....	FL.....	IA.....	Humana Medical Plan, Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	60052.....	37-1326199.....				Humana Benefit Plan of Illinois, Inc.....	IL.....	IA.....	Humana Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	26-3473328.....				Humana Health Plan of California, Inc.....	CA.....	IA.....	Humana Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	62-1552091.....				PHP Companies, Inc.....	TN.....	NIA.....	Humana Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	95749.....	62-1546662.....				Preferred Hlth Partnership of Tenn., Inc.....	TN.....	IA.....	PHP Companies, Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	62-1250945.....				Preferred Health Partnership, Inc.....	TN.....	NIA.....	PHP Companies, Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	26-4522426.....				Humana WellWorks LLC.....	DE.....	NIA.....	Health Value Management, Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	27-1323221.....				Humana Military Dental Services, Inc.....	DE.....	NIA.....	Humana Military Healthcare Services, Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	26-4823524.....				Concentra Inc.....	DE.....	NIA.....	Humana Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	14224.....	27-3991410.....				Humana Medical Plan of Michigan, Inc.....	MI.....	IA.....	Humana Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	27-4660531.....				Humana Medical Plan of Pennsylvania, Inc.....	PA.....	NIA.....	Humana Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	86-1050795.....				Hummingbird Coaching Systems LLC.....	OH.....	NIA.....	Humana Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	27-4535747.....				The Vitality Group, LLC.....	DE.....	OTH.....	See Footnote 7.....	Ownership.....	25.0.....	Humana Inc.....	7
00119.....	Humana Inc.....	00000.....	45-2254346.....				HumanaVitality, LLC.....	DE.....	OTH.....	See Footnote 7.....	Ownership.....	75.0.....	Humana Inc.....	7
00119.....	Humana Inc.....	00000.....	45-3116348.....				Humana Pharmacy Solutions, Inc.....	DE.....	NIA.....	Humana Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	45-3116348.....				HomeCare Health Solutions, Inc.....	FL.....	NIA.....	Humana Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	20-1981339.....				M.D. Care, Inc.....	CA.....	IA.....	Humana Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	77-0540040.....				Anvita, Inc.....	DE.....	NIA.....	Humana Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	45-3777894.....				HUMphire, Inc.....	DE.....	NIA.....	Humana Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	27-3387971.....				Arcadian Choice, Inc.....	TX.....	NIA.....	Arcadian Management Services, Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	12628.....	20-5089611.....				Arcadian Health Plan of Georgia, Inc.....	GA.....	IA.....	Arcadian Management Services, Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	11954.....	20-8688983.....				Arcadian Health Plan of Louisiana, Inc.....	LA.....	IA.....	Arcadian Management Services, Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	13558.....	26-2800286.....				Arcadian Health Plan of New York, Inc.....	NY.....	IA.....	Arcadian Management Services, Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	12999.....	26-0500828.....				Arcadian Heath Plan of North Carolina, Inc.....	NC.....	IA.....	Arcadian Management Services, Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	12151.....	20-1001348.....				Arcadian Health Plan, Inc.....	WA.....	IA.....	Arcadian Management Services, Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	86-0836599.....				Arcadian Management Services, Inc.....	DE.....	NIA.....	Arcadian Management Services, Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	12282.....	20-2036444.....				Arkansas Community Care, Inc.....	AR.....	IA.....	Arcadian Management Services, Inc./Arcadia Health Plan, Inc.....	Ownership.....		Humana Inc.....	18
00119.....	Humana Inc.....	00000.....	20-8602074.....				American Current Care of Arizona, P.A.....	AZ.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17

**SCHEDULE Y**  
**PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM**

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Name of Parent Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/ Person(s)	*
00119.....	Humana Inc.....	00000.....	26-3224187.....				American Current Care of Arkansas, P.A.....	AR.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17
00119.....	Humana Inc.....	00000.....	26-0656668.....				Amer Current Care of CA, A Med. Corp.....	CA.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17
00119.....	Humana Inc.....	00000.....	26-2043667.....				American Current Care of DE, P.A.....	DE.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17
00119.....	Humana Inc.....	00000.....	26-2089664.....				American Current Care of HI, Prof. Corp.....	HI.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17
00119.....	Humana Inc.....	00000.....	26-2104617.....				American Current Care of MA, P.C.....	MA.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17
00119.....	Humana Inc.....	00000.....	20-5997415.....				American Current Care of Michigan, P.C.....	MI.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17
00119.....	Humana Inc.....	00000.....	27-1160021.....				American Current Care of Missouri, P.C.....	MO.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17
00119.....	Humana Inc.....	00000.....	26-1809492.....				American Current Care of Nebraska, P.C.....	NE.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17
00119.....	Humana Inc.....	00000.....	26-1961910.....				American Current Care of New Jersey PA.....	NJ.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17
00119.....	Humana Inc.....	00000.....	26-2018322.....				American Current Care of NC, P.C.....	NC.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17
00119.....	Humana Inc.....	00000.....	26-3239475.....				American Current Care of Ohio, P.A., Co.....	OH.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17
00119.....	Humana Inc.....	00000.....	20-5805198.....				American Current Care, P.A.....	TX.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17
00119.....	Humana Inc.....	00000.....	26-2681597.....				Auto Injury Solutions, Inc.....	DE.....	NIA.....	Concentra Integrated Services, Inc.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	01-0510161.....				CM Occupational Health, L.L.C.....	ME.....	NIA.....	See Footnote 8.....	Joint Venture.....		Humana Inc.....	8
00119.....	Humana Inc.....	00000.....	20-0114482.....				Concentra Akron, L.L.C.....	DE.....	NIA.....	See Footnote 9.....	Joint Venture.....		Humana Inc.....	9
00119.....	Humana Inc.....	00000.....	62-1691148.....				Concentra Arkansas, L.L.C.....	DE.....	NIA.....	See Footnote 10.....	Joint Venture.....		Humana Inc.....	10
00119.....	Humana Inc.....	00000.....	75-2510547.....				Concentra Health Services, Inc.....	NV.....	NIA.....	Concentra Operating Corporation.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	26-4823524.....				Concentra Inc.....	DE.....	NIA.....	Humana Inc.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	04-3363415.....				Concentra Operating Corporation.....	DE.....	NIA.....	Concentra Inc.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	04-2658593.....				Concentra Integrated Services, Inc.....	MA.....	NIA.....	National Healthcare Resources, Inc.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	76-0546504.....				Concentra Laboratory, L.L.C.....	DE.....	NIA.....	National Healthcare Resources, Inc.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	75-2857879.....				Concentra Occ Health Research Institute.....	TX.....	NIA.....	Concentra Health Services, Inc.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	23-2901126.....				Concentra Occ Healthcare Harrisburg, L.P.....	PA.....	NIA.....	See Footnote 11.....	Joint Venture.....		Humana Inc.....	11
00119.....	Humana Inc.....	00000.....	75-2678146.....				Concentra Solutions, Inc.....	DE.....	NIA.....	Concentra Health Services, Inc.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	75-2784513.....				Concentra South Carolina, L.L.C.....	DE.....	NIA.....	See Footnote 12.....	Joint Venture.....		Humana Inc.....	12
00119.....	Humana Inc.....	00000.....	75-2821236.....				Concentra St. Louis, L.L.C.....	DE.....	NIA.....	See Footnote 13.....	Joint Venture.....		Humana Inc.....	13

SCHEDULE Y  
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Name of Parent Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/ Person(s)	*
00119.....	Humana Inc.....	00000.....	27-1743694.....				Concentra Worksite of Arizona, P.A.....	AZ.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17
00119.....	Humana Inc.....	00000.....	27-2935870.....				Concentra Worksite of CA, A Med. Corp.....	CA.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17
00119.....	Humana Inc.....	00000.....	22-3675361.....				Concentra-UPMC, L.L.C.....	DE.....	NIA.....	See Footnote 14.....	Joint Venture.....		Humana Inc.....	14
00119.....	Humana Inc.....	00000.....	86-0751979.....				Managed Prescription Program.....	AZ.....	NIA.....	Concentra Health Services, Inc.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	11-3273542.....				National Healthcare Resources, Inc.....	DE.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17
00119.....	Humana Inc.....	00000.....	94-3418907.....				Occspecialists Corp., A Medical Corp.....	CA.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17
00119.....	Humana Inc.....	00000.....	75-2688160.....				Occupational Health Centers of AR, P.A.....	TX.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17
00119.....	Humana Inc.....	00000.....	77-0469725.....				Occ Health Centers of CA, A Med. Corp.....	CA.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17
00119.....	Humana Inc.....	00000.....	51-0376661.....				Occupational Health Centers of DE, P.A.....	DE.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17
00119.....	Humana Inc.....	00000.....	58-2285009.....				Occupational Health Centers of GA, P.C.....	GA.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17
00119.....	Humana Inc.....	00000.....	74-2891603.....				Occ Health Centers of LA, A Prof. Corp.....	LA.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17
00119.....	Humana Inc.....	00000.....	38-2857561.....				Occupational Health Centers of MI, P.C.....	MI.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17
00119.....	Humana Inc.....	00000.....	47-0827928.....				Occupational Health Centers of NE, P.C.....	NE.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17
00119.....	Humana Inc.....	00000.....	22-3473542.....				Occupational Health Centers of NJ, P.A.....	NJ.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17
00119.....	Humana Inc.....	00000.....	20-3187863.....				Occupational Health Centers of NY, P.A.....	TX.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17
00119.....	Humana Inc.....	00000.....	26-2484838.....				Occupational Health Centers of NC, P.C.....	NC.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17
00119.....	Humana Inc.....	00000.....	26-3239286.....				Occ Health Centers of OH, P.A., Co.....	OH.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17
00119.....	Humana Inc.....	00000.....	86-0750222.....				Occ Health Centers of the Southwest, P.A.....	AZ.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17
00119.....	Humana Inc.....	00000.....	75-2014828.....				Occ Health Centers of the Southwest, P.A.....	TX.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17
00119.....	Humana Inc.....	00000.....	74-2731442.....				OHC of Hawaii, Inc.....	HI.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17
00119.....	Humana Inc.....	00000.....	04-3353031.....				OHR/Baystate, LLC.....	MA.....	NIA.....	See Footnote 15.....	Joint Venture.....		Humana Inc.....	15
00119.....	Humana Inc.....	00000.....	04-3353031.....				OHR/MMC, Limited Liability Company.....	ME.....	NIA.....	See Footnote 16.....	Joint Venture.....		Humana Inc.....	16
00119.....	Humana Inc.....	00000.....	98-0445802.....				OMP Insurance Company, Ltd.....		NIA.....	Concentra Operating Corporation.....	Ownership.....	100.0	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	20-0513177.....				OnSite OccMed, P.A.....	TX.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17
00119.....	Humana Inc.....	00000.....	20-2883662.....				Therapy Centers of South Carolina, P.A.....	SC.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17

SCHEDULE Y  
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Name of Parent Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/ Person(s)	*
00119.....	Humana Inc.....	00000.....	20-3033507.....				Therapy Centers of the Southwest I, P.A.....	TX.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17.....
00119.....	Humana Inc.....	00000.....	26-4101338.....				U.S. MedGroup of Arkansas, P.A.....	AR.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17.....
00119.....	Humana Inc.....	00000.....	22-3867212.....				U.S. MedGroup of Delaware, P.A.....	DE.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17.....
00119.....	Humana Inc.....	00000.....	20-3760561.....				U.S. MedGroup of Massachusetts, P.C.....	MA.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17.....
00119.....	Humana Inc.....	00000.....	75-2972185.....				U.S. MedGroup of Michigan, P.C.....	MI.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17.....
00119.....	Humana Inc.....	00000.....	22-3869772.....				U.S. MedGroup of New Jersey, P.A.....	NJ.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17.....
00119.....	Humana Inc.....	00000.....	26-3598351.....				U.S. MedGroup of New York, P.A.....	TX.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17.....
00119.....	Humana Inc.....	00000.....	26-2502158.....				U.S. MedGroup of North Carolina, P.C.....	NC.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17.....
00119.....	Humana Inc.....	00000.....	26-3239579.....				U.S. MedGroup of Ohio, P.A., Co.....	OH.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17.....
00119.....	Humana Inc.....	00000.....	75-2612924.....				U.S. MedGroup, P.A.....	TX.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17.....
00119.....	Humana Inc.....	00000.....	75-2645352.....				U.S. MedGroup, P.A.....	AZ.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17.....
00119.....	Humana Inc.....	00000.....	13-3464527.....				Occupational Health + Rehabilitation LLC.....	DE.....	NIA.....	Concentra Health Services, Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	27-4757941.....				Concentra Health Care, P.A.....	TX.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17.....
00119.....	Humana Inc.....	00000.....	32-0346082.....				Concentra Primary Care, P.A.....	TX.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17.....
00119.....	Humana Inc.....	00000.....	45-2897046.....				Concentra Primary Care of New Jersey PA.....	NJ.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17.....
00119.....	Humana Inc.....	00000.....	75-2891678.....				Texas MedGroup, P.A.....	TX.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17.....
00119.....	Humana Inc.....	00000.....	45-3637057.....				Concentra Primary Care of Arizona, PA.....	AZ.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17.....
00119.....	Humana Inc.....	00000.....	45-4041098.....				Concentra Primary Care of Illinois, P.C.....	IL.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17.....
00119.....	Humana Inc.....	00000.....	45-4091303.....				Concentra Primary Care of Ohio, P.A., Co.....	OH.....	NIA.....	See Footnote 17.....	Board of Directors.....		Humana Inc.....	17.....
00119.....	Humana Inc.....	00000.....	00-5893028.....				Humana Europe, Ltd.....	GB.....	NIA.....	Humana Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	26-3583438.....				HUM-Holdings International, Inc.....	KY.....	NIA.....	Humana Inc.....	Ownership.....	100.0.....	Humana Inc.....	
00119.....	Humana Inc.....	00000.....	26-3592783.....				HUM INT, LLC.....	DE.....	NIA.....	HUM-Holding International, Inc.....	Ownership.....	100.0.....	Humana Inc.....	17.....

STATEMENT AS OF MARCH 31, 2012 OF THE Humana Health Plan, Inc.

SCHEDULE Y  
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

Asterisk	Explanation
1	American Tax Credit Corporate Georgia Fund III, L.L.C., a Delaware limited liability company, was formed on October 4, 2004 for the purpose of investing in apartment complexes generating Georgia state low income housing tax credits. Humana Insurance Company is a Member with a 58.1736% ownership interest. The Savannah Bank, N.A. is a Member with a 1.6029% ownership interest, GMAC Insurance Georgia, L.L.C. is a Member with a 40.2133% ownership interest and Paramount Properties, Inc. is the Managing Member with 0.01% ownership interest.....
2	Availity, L.L.C., a Delaware limited liability company, was formed by affiliates of Humana Inc. and Blue Cross and Blue Shield of Florida, Inc. to develop and operate an Internet site on the World Wide Web to permit health plans to communicate and engage in electronic transactions with health care service providers initially in the State of Florida. HUM-e-FL, Inc., a subsidiary of Humana Inc., is a Member with a 22.5% ownership interest. Navigy, Inc., a subsidiary of Blue Cross and Blue Shield of Florida, Inc., is a Member with a 33.75% ownership interest, Health Care Service Corporation, a Member, has a 33.75% ownership interest, and Sellcore, Inc., a subsidiary of WellPoint and a Member, has a 10% ownership interest.....
3	Green Ribbon Health, L.L.C., a Delaware limited liability company, was formed on December 14, 2004 to enter into a joint venture with Humana Innovation Enterprises, Inc. and Pfizer Health Solutions, Inc. to implement the Centers for Medicare and Medicaid Disease Management Program. Humana Innovation Enterprises, Inc., a subsidiary of Humana Inc., is a Member with a 50% ownership interest and Pfizer Health Solutions, Inc., a subsidiary of Pfizer, Inc. is a Member with a 50% ownership interest.....
4	Healthcare E-Commerce Initiative, Inc., a Puerto Rico non-profit corporation, formed for the purpose of promoting an electronic bill processing and other e-commerce transactions to the providers of health care services in Puerto Rico. This is a joint venture with 5 members including Cooperativa de Seguros de Vida de Puerto Rico, Inc., La Cruz Azul de Puerto Rico, Inc., Medical Card System, Inc., MMM Healthcare, Inc. and Humana Insurance of Puerto Rico, Inc. jointly with Humana Health Plans of Puerto Rico, Inc. Each of the 5 members has an equal vote.....
5	Independent Care Health Plan, a Wisconsin corporation licensed as an HMO, operates an integrated, coordinated medical and social service managed care program for chronically disabled Medicaid recipients in Milwaukee, Wisconsin. CareNetwork, Inc. owns 50% of the company's stock. New Health Services, Inc. owns the other 50%.....
6	Sensei, Inc., a Delaware corporation, was incorporated on August 24, 2005 to enter into a joint venture with Humana Innovation Enterprises, Inc. and Card Guard AG, a Swiss corporation, dedicated to defining, building, and distributing the next generation of wireless health platforms. On December 12, 2008, Humana Innovation Enterprises, Inc. purchased all of Sensei, Inc.'s shares from Card Guard AG whereby Humana Innovation Enterprises, Inc. owned 100% of Sensei's issued and outstanding stock. On May 17, 2010, Robert Schwarzbarg purchased 81% of Sensei's shares from Humana Innovation Enterprises, Inc., leaving the company with a 19% ownership interest.....
7	HumanaVitality, LLC, a Delaware limited liability company, was formed on January 3, 2011, and The Vitality Group, LLC, a Delaware limited liability company, was formed on February 15, 2011 through affiliates of Humana Inc. and Discovery Holdings Limited, a South African company, to offer Discovery's Vitality wellness and loyalty program to Humana members. Humana WellWorks LLC, a subsidiary of Humana Inc., owns 75% of HumanaVitality, LLC and 25% of The Vitality Group, LLC. The Vitality Group, Inc., a subsidiary of Discovery Holdings Limited, owns 25% of HumanaVitality, LLC and 75% of The Vitality Group, LLC.....
8	CM Occupational Health, Limited Liability Company is a Maine limited liability company. Occupational Health + Rehabilitation LLC has a 90% ownership interest and Advanced Health Services, Inc. has a 10% ownership interest.....
9	Concentra Akron, L.L.C. is a Delaware limited liability company. Concentra Health Services, Inc. has a 51% ownership interest and Akron General Partners, Inc. has a 49% ownership interest.....
10	Concentra Arkansas, L.L.C. is a Delaware limited liability company. Concentra Health Services, Inc. has a 51% ownership interest and St. Vincent Community Health Services, Inc. has a 49% ownership interest.....
11	Concentra Occupational Healthcare Harrisburg, L.P. is a Delaware limited liability company. Concentra Health Services, Inc. has a 51% ownership interest and Pinnacle Health Hospitals has a 49% interest.....
12	Concentra South Carolina, L.L.C. is a Delaware limited liability company. Concentra Health Services, Inc. has a 51% ownership interest and North Trident Regional Hospital, Inc. has a 49% ownership interest.....
13	Concentra St. Louis, L.L.C. is a Delaware limited liability company. Concentra Health Services, Inc. has a 70% ownership interest and Tenet HealthSystem SL-HLC, Inc. has a 30% ownership interest.....
14	Concentra-UPMC, L.L.C. is a Delaware limited liability company. Concentra Health Services, Inc. has a 51% ownership interest and Community Occupational Medicine, Inc. has a 49% ownership interest.....
15	OHR/Baystate, LLC is a Massachusetts limited liability company. Occupational Health + Rehabilitation LLC has a 51% ownership interest and Bayside Medical Center has a 49% ownership interest.....
16	OHR/MMC, Limited Liability Company is a Maine limited liability company. Occupational Health + Rehabilitation LLC has a 51% ownership interest and Maine Health has a 49% ownership interest.....
17	Professional Services Relationship/Agreement with Concentra health Services, Inc.....
18	Ownership is 60% Arcadian Health Plan, Inc., 40% Arcadian Management Services, Inc.....
19	Reporting company.....



SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of **NO** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

RESPONSE

1. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?

.....NO.....

Explanation:

1. This type of business is not written.

Bar Code:

1.



95885201236500001

OVERFLOW PAGE FOR WRITE-INS

MQ002 Additional Aggregate Lines for Page 02 Line 25.  
\*ASSETS

	1	2	3	4
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets
2504. Prepaid Expenses.....	639,938	639,938	0	0
2505. ....			0	0
2597. Summary of remaining write-ins for Line 25 from Page 02	639,938	639,938	0	0

SCHEDULE A – VERIFICATION

Real Estate

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year .....	0	17,264
2. Cost of acquired:		
2.1 Actual cost at time of acquisition .....		0
2.2 Additional investment made after acquisition .....		0
3. Current year change in encumbrances .....		0
4. Total gain (loss) on disposals .....		0
5. Deduct amounts received on disposals .....		0
6. Total foreign exchange change in book/adjusted carrying value .....		0
7. Deduct current year's other than temporary impairment recognized .....		0
8. Deduct current year's depreciation .....		17,264
9. Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8) .....	0	0
10. Deduct total nonadmitted amounts .....	0	0
11. Statement value at end of current period (Line 9 minus Line 10) .....	0	0

SCHEDULE B – VERIFICATION

Mortgage Loans

	1	2
	Year To Date	Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest, December 31 of prior year .....	27,600,000	27,600,000
2. Cost of acquired:		
2.1 Actual cost at time of acquisition .....		0
2.2 Additional investment made after acquisition .....		0
3. Capitalized deferred interest and other .....		0
4. Accrual of discount .....		0
5. Unrealized valuation increase (decrease) .....		0
6. Total gain (loss) on disposals .....		0
7. Deduct amounts received on disposals .....		0
8. Deduct amortization of premium and mortgage interest points and commitment fees .....		0
9. Total foreign exchange change in book value/recorded investment excluding accrued interest .....		0
10. Deduct current year's other than temporary impairment recognized .....		0
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10) .....	27,600,000	27,600,000
12. Total valuation allowance .....		0
13. Subtotal (Line 11 plus Line 12) .....	27,600,000	27,600,000
14. Deduct total nonadmitted amounts .....	0	0
15. Statement value at end of current period (Line 13 minus Line 14) .....	27,600,000	27,600,000

SCHEDULE BA – VERIFICATION

Other Long-Term Invested Assets

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year .....	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition .....		0
2.2 Additional investment made after acquisition .....		0
3. Capitalized deferred interest and other .....		0
4. Accrual of discount .....		0
5. Unrealized valuation increase (decrease) .....		0
6. Total gain (loss) on disposals .....		0
7. Deduct amounts received on disposals .....		0
8. Deduct amortization of premium and depreciation .....		0
9. Total foreign exchange change in book/adjusted carrying value .....		0
10. Deduct current year's other than temporary impairment recognized .....		0
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10) .....	0	0
12. Deduct total nonadmitted amounts .....	0	0
13. Statement value at end of current period (Line 11 minus Line 12) .....	0	0

SCHEDULE D – VERIFICATION

Bonds and Stocks

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year .....	384,650,176	372,302,716
2. Cost of bonds and stocks acquired .....	75,214,220	98,832,959
3. Accrual of discount .....	21,164	80,731
4. Unrealized valuation increase (decrease) .....	134,595	2,778,148
5. Total gain (loss) on disposals .....	721,180	(237,070)
6. Deduct consideration for bonds and stocks disposed of .....	29,407,838	85,153,223
7. Deduct amortization of premium .....	1,035,660	3,954,085
8. Total foreign exchange change in book/adjusted carrying value .....		0
9. Deduct current year's other than temporary impairment recognized .....		0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9) .....	430,297,837	384,650,176
11. Deduct total nonadmitted amounts .....	0	0
12. Statement value at end of current period (Line 10 minus Line 11) .....	430,297,837	384,650,176

STATEMENT AS OF MARCH 31, 2012 OF THE Humana Health Plan, Inc.

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity  
During the Current Quarter for all Bonds and Preferred Stock by Rating Class

	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
<b>BONDS</b>								
1. Class 1 (a).....	325,216,926	1,181,903,063	984,296,414	(838,808)	521,984,767	0	0	325,216,926
2. Class 2 (a).....	63,203,857	29,111,924	6,717,785	(172,496)	85,425,500	0	0	63,203,857
3. Class 3 (a).....	8,875,815		428,970	184,471	8,631,316	0	0	8,875,815
4. Class 4 (a).....	2,672,010		6,410	(12,427)	2,653,173	0	0	2,672,010
5. Class 5 (a).....	0				0	0	0	0
6. Class 6 (a).....	0				0	0	0	0
7. Total Bonds	399,968,607	1,211,014,987	991,449,579	(839,261)	618,694,754	0	0	399,968,607
<b>PREFERRED STOCK</b>								
8. Class 1 .....	0				0	0	0	0
9. Class 2 .....	0				0	0	0	0
10. Class 3 .....	0				0	0	0	0
11. Class 4 .....	0				0	0	0	0
12. Class 5 .....	0				0	0	0	0
13. Class 6 .....	0				0	0	0	0
14. Total Preferred Stock.....	0	0	0	0	0	0	0	0
15. Total Bonds & Preferred Stock	399,968,607	1,211,014,987	991,449,579	(839,261)	618,694,754	0	0	399,968,607

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of non-rated short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$ .....219,146,213 ; NAIC 2 \$ ..... ;  
NAIC 3 \$ ..... ; NAIC 4 \$ ..... ; NAIC 5 \$ ..... ; NAIC 6 \$ .....

SCHEDULE DA - PART 1
Short-Term Investments

	1	2	3	4	5
	Book/Adjusted Carrying Value	Par Value	Actual Cost	Interest Collected Year To Date	Paid for Accrued Interest Year To Date
9199999	53,149,067	XXX	53,149,067	2,289	

SCHEDULE DA - VERIFICATION
Short-Term Investments

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	25,697,990	9,584,640
2. Cost of short-term investments acquired .....	510,821,056	1,115,017,328
3. Accrual of discount .....		0
4. Unrealized valuation increase (decrease).....		0
5. Total gain (loss) on disposals .....		0
6. Deduct consideration received on disposals .....	483,369,979	1,098,903,978
7. Deduct amortization of premium.....		0
8. Total foreign exchange change in book/adjusted carrying value.....		0
9. Deduct current year's other than temporary impairment recognized.....		0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	53,149,067	25,697,990
11. Deduct total nonadmitted amounts.....		0
12. Statement value at end of current period (Line 10 minus Line 11)	53,149,067	25,697,990

Schedule DB - Part A - Verification

NONE

Schedule DB - Part B - Verification

NONE

Schedule DB - Part C - Section 1

NONE

Schedule DB - Part C - Section 2

NONE

Schedule DB - Verification

NONE

SCHEDULE E - VERIFICATION  
(Cash Equivalents)

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	20,399,889	14,999,980
2. Cost of cash equivalents acquired .....	624,979,710	2,702,361,128
3. Accrual of discount .....	10,489	35,271
4. Unrealized valuation increase (decrease) .....		0
5. Total gain (loss) on disposals.....	(538)	(222)
6. Deduct consideration received on disposals .....	479,392,404	2,696,996,268
7. Deduct amortization of premium .....		0
8. Total foreign exchange change in book/adjusted carrying value .....		0
9. Deduct current year's other than temporary impairment recognized .....		0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9) .....	165,997,146	20,399,889
11. Deduct total nonadmitted amounts .....		0
12. Statement value at end of current period (Line 10 minus Line 11)	165,997,146	20,399,889

Schedule A - Part 2

NONE

Schedule A - Part 3

NONE

Schedule B - Part 2

NONE

Schedule B - Part 3

NONE

Schedule BA - Part 2

NONE

Schedule BA - Part 3

NONE



STATEMENT AS OF MARCH 31, 2012 OF THE Humana Health Plan, Inc.

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

1	2	3	4	5	6	7	8	9	10
CUSIP Identification	Description	Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation or Market Indicator <sup>(a)</sup>
Bonds - U.S. Governments									
912828-DW-9	UNITED STATES TREASURY GOVERNMENT		02/14/2012	NOMURA SECURITIES		387,558	350,000		1
912828-DV-9	UNITED STATES TREASURY GOVERNMENT		02/14/2012	NOMURA SECURITIES		581,914	520,000	5,421	1
0599999 - Bonds - U.S. Governments						969,472	870,000	5,421	XXX
Bonds - U.S. States, Territories and Possessions									
13062T-EC-4	CALIFORNIA STATE MUNI		02/17/2012	MORGAN STANLEY		2,217,820	2,000,000	47,778	1FE
837147-Z3-4	S CAROLINA ST PUBLIC SERVICE MUNI		02/15/2012	WELLS FARGO		1,211,910	1,000,000	6,944	1FE
92817S-YU-6	VIRGINIA ST PUB SCHOOL AUTH MUNI		03/23/2012	CITIGROUP GLOBAL MARKETS INC		2,457,080	2,000,000	5,556	1FE
1799999 - Bonds - U.S. States, Territories and Possessions						5,886,810	5,000,000	60,278	XXX
Bonds - U.S. Special Revenue									
251237-W6-6	DETROIT MICHIGAN SEWER DISPOSAL		03/23/2012	MERRILL LYNCH		2,130,000	3,000,000	7,088	1FE
31417A-X6-1	FNMA 30 YR		01/13/2012	DEUTSCHE BANK		4,118,256	3,985,610	4,650	1
59164G-DG-4	METRO WASTERWTR RECLEMATION DIS		02/03/2012	WELLS FARGO		432,789	350,000	632	1FE
85230M-CM-4	ST MARY HOSP AUTH PA HEALTH SYS RE		02/16/2012	MERRILL LYNCH		1,239,914	1,050,000	14,146	1FE
3199999 - Bonds - U.S. Special Revenue and Special Assessment and all Non-Guaranteed Obligations of Agencies and Authorities of Government and Their Political Subdivisions						7,920,958	8,385,610	26,515	XXX
Bonds - Industrial and Miscellaneous (Unaffiliated)									
059500-AD-0	BACM.06-3 CMBS		01/27/2012	VARIOUS		1,375,030	1,226,373		1FM
172967-EM-9	CIT GROUP INC CORPORATE		02/28/2012	VARIOUS		7,529,134	6,721,000	115,494	1FE
201730-AE-1	GCCFC 07-GC9 CMBS		01/27/2012	NOMURA SECURITIES		1,233,105	1,125,000		1FM
22545L-AD-1	CSMC.06-C5 CMBS		01/18/2012	J.P. MORGAN		3,009,141	2,775,000	9,007	1FM
37247D-AP-1	GENWORTH FINANCIAL INC CORPORATE		03/08/2012	GOLDMAN SACHS		2,008,500	1,950,000	69,801	2FE
391164-AF-7	GREAT PLAINS ENERGY INC CORPORATE		03/19/2012	GOLDMAN SACHS		7,160,370	7,000,000	13,611	2FE
42217K-AY-2	HEALTH CARE REIT INC CORPORATE		03/27/2012	J.P. MORGAN		6,480,110	6,500,000		2FE
46625H-GN-4	JP MORGAN CHASE CORP		02/28/2012	J.P. MORGAN		5,677,400	5,000,000	55,295	1FE
500769-EX-8	KFW INTERNATIONAL FINANCE CORPORATE		01/19/2012	DEUTSCHE BANK		2,222,664	2,225,000		1FE
50179A-AE-7	LB-UBS CMBS 2007-C1		01/13/2012	NOMURA SECURITIES		1,596,375	1,440,000	1,736	1FM
62718Q-AA-3	MURRAY STREET INVESTMENT TRUST		03/05/2012	GOLDMAN SACHS		1,772,208	1,750,000	26,644	1FE
652482-BX-7	NEWS AMERICA INC. CORPORATE		01/17/2012	CITIGROUP GLOBAL MARKETS INC		1,755,949	1,550,000	37,706	2FE
67059T-AC-9	NUSTAR LOGISTICS CORPORATE		01/30/2012	CITIGROUP GLOBAL MARKETS INC		872,935	875,000		2FE
74432N-AA-0	PRUDENTIAL COVERED TRUST		03/27/2012	DEUTSCHE BANK		6,910,000	6,910,000		1FE
78573A-AA-8	SABMILLER HOLDINGS INC CORPORATE		01/10/2012	MORGAN STANLEY		1,363,451	1,370,000		2FE
880451-AS-8	TENNESSEE GAS PIPELINE CORPORATE		03/28/2012	J.P. MORGAN		6,464,419	5,625,000	16,406	2FE
88732J-AS-7	TIME WARNER CORPORATE		01/13/2012	WELLS FARGO		1,031,692	815,000	20,171	2FE
13643E-AG-0	CANADIAN OIL SANDS LTD CORPORATE	A	03/26/2012	MERRILL LYNCH		1,974,498	1,990,000		2FE
3899999 - Bonds - Industrial and Miscellaneous (Unaffiliated)						60,436,980	56,847,373	365,871	XXX
8399997 - Subtotals- Bonds - Part 3						75,214,220	71,102,983	458,085	XXX
8399999 - Subtotals - Bonds						75,214,220	71,102,983	458,085	XXX
9999999 Totals						75,214,220	XXX	458,085	XXX

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues .

STATEMENT AS OF MARCH 31, 2012 OF THE Humana Health Plan, Inc.

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter

1	2	3	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Identification	Description	Foreign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amortization)/ Accretion	Current Year's Other Than Temporary Impairment Recognized	Total Change in B./A.C.V. (11+12-13)	Total Foreign Exchange Change in B./A.C.V.	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Designation or Market Indicator (a)
Bonds - U.S. Governments																					
313462-CA-8...	FEDERAL HOME LOAN MTGE CO AGCY FTST		03/30/2012	VARIOUS		3,500,250	3,500,000	3,500,000	3,500,000				.0		3,500,000		.250	.250	.61,399	09/30/2019	1FE
36202E-VP-1...	GOVERNMENT NATIONAL MORTGAGE GNMA		03/20/2012	MBS PAYDOWN		.533,611	.533,611	.537,363	.533,701		(90)		(90)		.533,611			.0	.5,284	08/01/2038	1
912828-KC-3...	UNITED STATES TREASURY GOVERNMENT		02/15/2012	MATURITY		.870,000	.870,000	.873,794	.870,152		(152)		(152)		.870,000			.0	.5,981	02/15/2012	1
0599999 - Bonds - U.S. Governments						4,903,861	4,903,611	4,911,157	4,903,853	0	(242)	0	(242)	0	4,903,611	0	250	250	72,664	XXX	XXX
Bonds - U.S. States, Territories and Possessions																					
641461-AD-0...	NEVADA ST MUNI		03/01/2012	MATURITY		.375,000	.375,000	.400,350	.376,225		(1,225)		(1,225)		.375,000			.0	.9,375	03/01/2012	1FE
1799999 - Bonds - U.S. States, Territories and Possessions						375,000	375,000	400,350	376,225	0	(1,225)	0	(1,225)	0	375,000	0	0	0	9,375	XXX	XXX
Bonds - U.S. Special Revenue and Special Assessment and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions																					
31288D-U8-0...	FREDDIE MAC FHLMC		03/01/2012	MBS PAYDOWN		.770	.770	.797	.771				.0		.770			.0	.9	12/01/2032	1
3128GP-TZ-6...	FED NTL MTG ASSO		03/01/2012	MBS PAYDOWN		.10,667	.10,667	.10,995	.10,672		(5)		(5)		.10,667			.0	.99	01/01/2017	1
3128M1-CR-8...	FNMA GOLD		03/01/2012	MBS PAYDOWN		.198,094	.198,094	.210,165	.198,506		(412)		(412)		.198,094			.0	1,616	04/01/2021	1
3128M1-LB-3...	COMB 15YR FGOLD		03/01/2012	MBS PAYDOWN		.178,708	.178,708	.189,598	.179,072		(363)		(363)		.178,708			.0	1,393	12/01/2020	1
3128M1-NZ-8...	FHLMC FGOLD		03/01/2012	MBS PAYDOWN		.208,141	.208,141	.220,824	.208,572		(431)		(431)		.208,141			.0	1,725	12/01/2020	1
3128M1-PJ-2...	FGOLD 15YR GIANT		03/01/2012	MBS PAYDOWN		.102,884	.102,884	.109,154	.103,095		(211)		(211)		.102,884			.0	.855	05/01/2021	1
3128M1-R7-6...	FHLMC FGOLD		03/01/2012	MBS PAYDOWN		.161,941	.161,941	.171,809	.162,275		(334)		(334)		.161,941			.0	1,351	05/01/2021	1
3128M1-SY-6...	FGOLD 15YR GIANT		03/01/2012	MBS PAYDOWN		.79,891	.79,891	.84,760	.80,017		(125)		(125)		.79,891			.0	.569	12/01/2021	1
3128M6-P2-8...	FHLMC FGOLD		03/01/2012	MBS PAYDOWN		.105,702	.105,702	.106,871	.105,729		(27)		(27)		.105,702			.0	1,058	06/01/2038	1
3128MB-N7-8...	FNMA FGOLD		03/01/2012	MBS PAYDOWN		.66,115	.66,115	.70,143	.66,278		(163)		(163)		.66,115			.0	.502	12/01/2021	1
312942-NM-3...	FHLMC FGOLD		03/01/2012	MBS PAYDOWN		.234,521	.234,521	.240,420	.234,671		(150)		(150)		.234,521			.0	1,760	09/01/2040	1
312971-BM-5...	FNMA FGOLD		03/01/2012	MBS PAYDOWN		.43,957	.43,957	.46,636	.44,025		(68)		(68)		.43,957			.0	.347	04/01/2020	1
312971-CQ-5...	FHLMC FGOLD		03/01/2012	MBS PAYDOWN		.26,000	.26,000	.27,585	.26,025		(25)		(25)		.26,000			.0	.195	04/01/2020	1
312971-FQ-2...	FHLMC FGOLD		03/01/2012	MBS PAYDOWN		.304,342	.304,342	.322,888	.304,799		(456)		(456)		.304,342			.0	2,169	04/01/2020	1
312971-MS-0...	FHLMC FGOLD		03/01/2012	MBS PAYDOWN		.122,363	.122,363	.129,820	.122,696		(332)		(332)		.122,363			.0	.937	05/01/2020	1
312972-DX-7...	FHLMC FGOLD		03/01/2012	MBS PAYDOWN		.55,505	.55,505	.58,888	.55,573		(68)		(68)		.55,505			.0	.391	04/01/2020	1
312972-EK-4...	FHLMC FGOLD		03/01/2012	MBS PAYDOWN		.56,013	.56,013	.59,426	.56,107		(94)		(94)		.56,013			.0	.619	04/01/2020	1
312972-GT-3...	FHLMC FGOLD		03/01/2012	MBS PAYDOWN		.108,524	.108,524	.115,138	.108,673		(148)		(148)		.108,524			.0	.904	04/01/2020	1
312972-GZ-9...	FHLMC FGOLD		03/01/2012	MBS PAYDOWN		.240,425	.240,425	.255,076	.241,403		(978)		(978)		.240,425			.0	2,362	04/01/2020	1
3132GL-T2-0...	FNMA FGOLD		03/01/2012	MBS PAYDOWN		.3,842	.3,842	.3,931	.3,842				.0		.3,842			.0	.23	01/01/2041	1
31336W-CP-2...	FHLMC		03/01/2012	MBS PAYDOWN		.67,019	.67,019	.71,103	.67,152		(133)		(133)		.67,019			.0	.558	10/01/2020	1
31371K-NX-5...	FED NTL MTG ASSO		03/01/2012	MBS PAYDOWN		.40,792	.40,792	.42,216	.40,820		(28)		(28)		.40,792			.0	.342	05/01/2017	1
3138AT-WF-3...	FNMA FED NTL MTG ASSO		03/01/2012	MBS PAYDOWN		.12,884	.12,884	.13,174	.12,885		(1)		(1)		.12,884			.0	.79	01/01/2042	1
3138E1-HW-0...	FNMA FED NTL MTG ASSO		03/26/2012	MBS PAYDOWN		.10,286	.10,286	.10,575	.10,288		(2)		(2)		.10,286			.0	.70	12/01/2041	1
3138E1-JH-1...	FNMA FED NTL MTG ASSO		03/01/2012	MBS PAYDOWN		.8,621	.8,621	.8,831	.8,622		(1)		(1)		.8,621			.0	.51	01/01/2042	1
3138E2-R8-0...	FNMA		03/26/2012	MBS PAYDOWN		.31,822	.31,822	.32,717	.31,826		(3)		(3)		.31,822			.0	.187	12/01/2041	1

## SCHEDULE D - PART 4

CUSIP Identification	Description	Foreign Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Change in Book/Adjusted Carrying Value					Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Designation or Market Indicator (a)
									11	12	13	14	15							
									Unrealized Valuation Increase/ (Decrease)	Current Year's (Amortization)/ Accretion	Current Year's Other Than Temporary Impairment Recognized	Total Change in B./A.C.V. (11+12-13)	Total Foreign Exchange Change in B./A.C.V.							
31392G-UZ-6	FED NTL MTG ASSO FNMA-02-94: HQ	03/01/2012	MBS PAYDOWN		168,048	168,048	177,501	168,434		(386)		(386)		168,048			.0	1,238	01/01/2018	1
31396A-MX-9	FEDERAL HOME LOAN MTGE CO FHLMC	03/01/2012	MBS PAYDOWN		55,088	55,088	56,556	55,118		(30)		(30)		55,088			.0	504	09/01/2035	1
31398V-TM-8	FH3659D: BA CMO	03/01/2012	MBS PAYDOWN		643,559	643,559	689,387	644,664		(1,105)		(1,105)		643,559			.0	5,354	02/01/2039	1
31406Y-4E-7	FNMA 30YR	03/01/2012	MBS PAYDOWN		54,123	54,123	56,744	54,194		(72)		(72)		54,123			.0	454	05/01/2035	1
31410F-Z2-4	FED NTL MTG ASSO FNMA	03/01/2012	MBS PAYDOWN		125,416	125,416	123,613	125,370		46		46		125,416			.0	1,045	07/01/2020	1
31415W-PB-3	FED NTL MTG ASSO FNMA 30YR	03/01/2012	MBS PAYDOWN		402,949	402,949	429,786	403,477		(528)		(528)		402,949			.0	3,814	11/01/2038	1
31416B-4X-3	FED NTL MTG ASSO 15YR	03/01/2012	MBS PAYDOWN		1,594,910	1,594,910	1,710,292	1,600,064		(5,154)		(5,154)		1,594,910			.0	14,913	01/01/2022	1
31416W-LC-4	FED NTL MTG ASSO 30YR	03/01/2012	MBS PAYDOWN		2,761,798	2,761,798	2,877,017	2,763,898		(2,100)		(2,100)		2,761,798			.0	21,816	07/01/2040	1
31417A-X6-1	FNMA 30 YR	03/26/2012	VARIOUS		3,363,476	3,240,521	3,348,370					.0	3,348,296		15,180	15,180	3,784	01/01/2042	1	
31418W-OP-8	FED NTL MTG ASSO FNMA	03/01/2012	MBS PAYDOWN		89,684	89,684	94,126	89,787		(103)		(103)		89,684			.0	604	08/01/2025	1
31419B-CT-0	FNMA 30 YR	03/01/2012	MBS PAYDOWN		65,106	65,106	65,503	65,111		(5)		(5)		65,106			.0	404	03/01/2041	1
575566-R9-7	REF-GEN TRANSN SYS-SER A MUNI	03/01/2012	MATURITY		170,000	170,000	188,239	170,493		(493)		(493)		170,000			.0	4,675	03/01/2012	1FE
915137-3V-3	UNIVERSITY TEXAS MUNI	03/27/2012	TD SECURITIES		3,750,990	3,000,000	3,491,280	3,436,145		(8,498)		(8,498)		3,427,646		323,344	323,344	93,750	08/15/2022	1FE
3199999 - Bonds - U.S. Special Revenue and Special Assessment and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions					15,724,977	14,851,033	15,921,955	12,061,147	0	(22,989)	0	(22,989)	0	15,386,454	0	338,523	338,523	172,527	XXX	XXX
Bonds - Industrial and Miscellaneous (Unaffiliated)																				
023767-AA-4	AMERICAN AIRLINES INC CORPORATE	02/01/2012	CALLED SECURITY at 100.000		11,359	11,359	11,359	11,359				.0		11,359			.0	298	07/31/2021	2FE
05946X-BV-4	BANK OF AMERICA FDG CO 2003-1	03/20/2012	CALLED SECURITY at 100.000		1,929	1,929	1,970	1,964		(35)		(35)		1,929			.0	19	05/01/2033	1FW
06052G-AC-2	BANK OF AMERICA ABS FTST	03/15/2012	CALLED SECURITY at 100.000		39,948	39,948	40,118	40,038		(90)		(90)		39,948			.0	111	12/15/2013	1FE
09657M-AC-2	BMW ABS FTST	03/26/2012	CALLED SECURITY at 100.000		342,456	342,456	342,449	342,452		.4		.4		342,456			.0	779	04/25/2014	1FE
30257F-AA-1	FPL ENERGY NATIONAL WIND CORPORATE	03/26/2012	CALLED SECURITY at 100.000		6,410	6,410	6,410	6,301	108	</										

## E05.1

Schedule DB - Part A - Section 1

NONE

Schedule DB - Part B - Section 1

NONE

Schedule DB - Part D

NONE

Schedule DL - Part 1

NONE

Schedule DL - Part 2

NONE

**STATEMENT AS OF MARCH 31, 2012 OF THE Humana Health Plan, Inc.**

## SCHEDULE E - PART 1 - CASH

[illegible]

## SCHEDULE E - PART 2 - CASH EQUIVALENTS

E12